

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000106580

Entity Name: NOKOMIS VETERINARY CLINIC, INC.

Current Principal Place of Business:

405 W. ALBEE RD
NOKOMIS, FL 34275

Current Mailing Address:

405 W. ALBEE RD
NOKOMIS, FL 34275

FEI Number: 65-1054704

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCLOUD, GRANT
1605 MAIN STREET
SUITE700
SARASOTA, FL 34236 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title O
Name LANDESS, JACK L
Address 14045 MOSSY OAK LANE
City-State-Zip: MYAKKA CITY FL 34251

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JACK LANDESS DVM

OWNER

02/12/2024

Electronic Signature of Signing Officer/Director Detail

Date