

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V47046

**Entity Name:** SAN JOSE - BEAUCLERC ANIMAL CLINIC, INC.

**Current Principal Place of Business:**

9319 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

9319 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257

**FEI Number:** 59-3131599

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MCMILLIAN, GRANT E  
9319 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257 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:** GRANT MCMILLIAN

01/12/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MCMILLIAN, GRANT E  
Address        9319 SAN JOSE BLVD.  
City-State-Zip: JACKSONVILLE FL 32257

Title            PRACTICE ADMINISTRATOR  
Name            NOE, LYNETTE  
Address        9319 SAN JOSE BLVD.  
City-State-Zip: JACKSONVILLE FL 32257

*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:** GRANT E MCMILLIAN

PRESIDENT

01/12/2017

Electronic Signature of Signing Officer/Director Detail

Date