FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 449300

1. Corporation Name

STREET ADDRESS

WILLIAM H. SHELTON, D.V.M., P.A.

Principal Place	of Business .	Mailing Address				, 0,0,, 4,2,, 6,0,, 6,0,, 6,	4., 122,	
7108 MINTWOO	- -	7108 MINTWOOD CT						
TAMPA FL 33615		P.O. BOX 262857 TAMPA FL 33615		DO NOT WRITE IN THIS SPACE				
US		US			3. Date Incorporated or Qualifed			
					03/26/1974		ĺ	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied	For	
21		26			59-1539119	Not App	licable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Addition		
22		27			5. Certificate of Status Desired	Fee Require	d	
City & State		City & State		6. Election Campaign Financing	\$5.00 May			
23		28			Trust Fund Contribution	Added to Fee	es	
Zip	Country	Zip	_ Count	ry	8. This corporation owes the current year I			
24	25		0		Personal Property Tax.	☐ Yes ☐ N	0	
	9. Name and Address of Curre	nt Registered Agent		1 Name	10. Name and Address of New Registere	d Agent		
· QHEI	LTON, WILLIAM H.		°	Name				
	BRIDGETON DR.		8	2 Street Add	iress (P.O. Box Number is Not Acceptable)			
TAMPA FL 33626				3	2 2 2 2 3 4 2 1 3 2 2 3 3 4 2 3 4 2 3 4 3 4 3 4 3 4 3 4			
7731911	A TE GOOLG		ľ	3			41 17 1	
			8	4 City	The second secon	85 Zip Code	Ti pil	
4		00	45- abo		moration submits this statement for the purpose	of changing its regis	tered	
.11. Pursuant	to the provisions of Sections 607.05 egistered agent, or both, in the State	oz and 607.1508, Florida Statutes of Florida, Such change was aut	norized b	y the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the app	ointment as register	red	
.5 agent. I ai	m familiar with and accept the oblig		,	98) 1/2	fen am 1/11/9	-		
SIGNATURE	ergnature, typed or printed name of registered age		lagistared A		red when reinstating) DATE		1	
12.		ND DIRECTORS	13.	,	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS I	N 12	
TITLE	PD	☐ DELETE	1.1 TITU		The second second	Change	Addition	
NAME	SHELTON, WILLIAM		1.2 NAM	E			Į	
STREET ADDRESS								
	9833 BRIDGETON DR.		1.3 STRE	ET ADDRESS		1	1	
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	TAMPA FL 33626	☐ DELETE	1.4 CITY	-ST-ZIP] Addition	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:

6.4 CITY-ST-ZIP

Jan 27, 1999 8:00 am Secretary of State

01-27-1999 90052 011 ***150.00