2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 489480

Entity Name: R.R. HANN, DVM, "P.A."

FILED Mar 19, 2009 Secretary of State

•	,			
Current Principal Place of Business: 10501 RIVERVIEW DRIVE RIVERVIEW, FL 335784367		New Principal Place of Business: 10501 RIVERVIEW DRIVE RIVERVIEW, FL 335784367 US		
				Current Mailing Address:
10501 RIVERVIEW DRIVE RIVERVIEW, FL 335784367		10501 RIVERVIEW DRIVE RIVERVIEW, FL 335784367 US		
FEI Number: 59-1649221	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
HANN, RANDY R 9304 RIVER COVE DRIV RIVERVIEW, FL 33578				
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electror	nic Signature of Registered Age	ent	Date	
Election Campaign Financing	g Trust Fund Contribution ().			

Title:

City-St-Zip:

OFFICERS AND DIRECTORS:

() Delete

RIVERVIEW, FL 33578

Title:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

RIVERVIEW, FL 33578 US

(X) Change () Addition

HANN, RANDY R HANN, RANDY R Name: Name: 9304 RIVER COVE DRIVE 9304 RIVER COVE DRIVE Address: Address: City-St-Zip: RIVERVIEW, FL 33578 City-St-Zip: RIVERVIEW, FL 33578 US Title: () Delete Title: (X) Change () Addition HANN, BONNIE J HANN, BONNIE J Name: Name: Address: 9304 RIVER COVE DR. Address: 9304 RIVER COVE DR. RIVERVIEW, FL 33578 RIVERVIEW, FL 33578 US City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: HANN, GINA L Name: HANN, GINA L 6628 WATERTON DRIVE Address: 6628 WATERTON DRIVE Address: City-St-Zip: RIVERVIEW, FL 33578 City-St-Zip: RIVERVIEW, FL 33578 US Title: () Delete Title: (X) Change () Addition HANN, JUSTIN R HANN, JUSTIN R Name: Name: 6628 WATERTON DRIVE 6628 WATERTON DRIVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RANDY R. HANN PD 03/19/2009