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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 517995

(7)

JAMES E. PENNINGTON, D.V.M. P.A.

Principal Place of Business			Mailing Address				- sederal diser sess tabule starte sural brit oldes ordes profit diber bibly diber		
1051 S WATER STARKE FL 32			1051 S WATER ST STARKE FL 32091-4571						
							3. Date Incorporated or Qualified 3a. Date of Last Report 02/01/1996		
2. Principal F 21	Pace of Business	2a. Ma 26	ailing Address			******	4. FEI Number Applied For 59-1697744 Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired Section Secti		
City & Stal	le		y & State				6. Election Campaign Financing \$5.00 May Be		
23		28					Trust Fund Contribution Added to Fees		
Zip	Country	Zq)		untry	1	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29		30	1		Florida Statutes Ryes No		
	9. Name and Address of Cur	rrent Hegistere	a Agent		81	Name	10. Name and Address of New Registered Agent		
PENNINGTON, JAMES E					"	INAITIE			
1051 S. WATER STREET Starke Fl 32091					82	Street Add	dress (P.O. Box Number is Not Acceptable)		
OII.	WHILE I E OFFICE				83				
					84	City	FL 85 Zip Code		
office or agent 1: SIGNATURE	registered agent or both, in the Stam familiar with, and eccept the of	tale of Florida. Digations of, Se	Such change was ection 607.0505, F	authorize lorida Sta	d by tute:	y the corpora s.	reporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered		
12.		AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD		☐ DELETE	1.1 T	ıŢĻĒ		Change Additio		
NAME	PENNINGTON, JAMES E			1.2 N	AME				
STREET ADDRESS	ROUTE 2 BOX 1680			1.3 S	TREET	ADDRESS			
C-TY - ST - ZIP	STARKE FL			1.4 0	ITY-5	ST-ZIP			
TITLE	\$		☐ DELETE	2.17	ITLE		Change Additio		
NAMÉ	PENNINGTON, KATHRYN W	1		2.2 N	AME				
STREET ADDRESS	ROUTE 2 BOX 1680			235	TREET	r address			
CITY-ST-7P	STARKE FL					ST-ZIP			
THLE			DELETE	3.1 T			Change Addition		
NAME				3.2 N					
STREET ADDRESS				l li		T ADDRESS			
CHY-SI-7+			DELETE		_	ST-ZIP	☐ Change ☐ Additio		
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NAME				1	VAME	1			
STREET ADDRESS						T ADDRESS			
CITY-ST-ZIP TITLE			DELETE	5.11		ST - ZIP	Change Addilio		
			Land Direction	5.2 N		ļ	La comingo La Facilita		
NAM(r ADDDECC			
STREET ADDRESS						F ADDRESS			
C-TY - ST - ZIP TITLE	<u> </u>		DELETE	5.4 U		ST-ZIP	Change Addition		
NAME			Annual Control of	- 1	IAME	\	and others		
STREET ADDRESS			•			T ADDRESS			

64 CITY-ST-ZIP

14. The nereby 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 congretation or the receiver or trusted employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Blo

CITY - \$1 - 74P

THE AND TYPEO OR PRINTED NAME OF SIGNING OFFICE

FILED

Jan 29 1997 8:00am

Secretary of State