## 2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 601537** Aug 30, 2000 8:00 am Secretary of State LARMON, JOE S., D.V.M., P.A. 08-30-2000 90005 050 \*\*\*150.00 Principal Place of Business Mailing Address ROUTE 2 BOX 133 J.L. RT 2 BOX 133 J.L. **DONALSOVILLE GA 31745 DONALSONVILLE GA 31745** 2. Principal Place of Business 3. Mailing Address 3241 LAKE:SHOREDDRIVE:WEST 3241 LAKE SHORE DRIVE WEST Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State TALLAHASSEE, FL City & State 4. FEI Number 59-1274881 TALLAHASSEE, FL Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired 32312-1843 32312-1843 US US Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent S.LARMON \_\_\_ ROBERTS, WILLIAM A Street Address (P.O. Box Number is Not Acceptable) 3241 LAKE SHORE DRIVE WEST 7301 FIRST AVENUE SOUTH ST PETERSBURG FL 33707 32312-1843 CITAL LA HASSEE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, o both, in the State of Florida. JOE S. LARMON SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition ☐ Delete TITLE LARMON, JOE S. NAME NAME 3241 LAKE SHORE DRIVE WEST ROUTE 2 BOX 133 J.L. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DONALSONVILLE GA 31745** TALLAHASSEE, FL 32312-1843 ☐ Change X Addition Delete TITLE NAME JOY G. LARMON STREET ADDRESS STREET ADDRESS 3241 LAKE SHORE DRIVE WEST CITY-ST-ZIP TALLAHASSEE, FL 32312-1843 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS C/TY-ST-ZIE CITY-ST-ZIP ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUTY-ST-7/P

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE: &

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE PRINTED NAME OF SIGNING OFFICER OR DIRECTO

☐ Oelete

× 8-25-00

(850)523-9318

☐ Change

☐ Addition

Daytime Phone #

Attachment D#60537 DOUE2451

Joe S. Larmon, D.V.M., P.A. C/O Joe S. Larmon, D.V.M. 3241 Lake Shore Drive West Tallahassee, FL 32312-1843

August 24, 2000

Florida Department of State P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs:

Enclosed is the Completed 2000 Uniform Business Report (UBR) with a check payable to the Department of State for \$150.00.

I was in the process of moving back to Florida when the first 2000 Uniform Business Report was mailed and I do not remember having it forwarded to me. However, this Second UBR was forwarded to my new Tallahassee address.

Per, William A. Roberts, my accountant's call to your office on Monday, August 21, 2000 your office stated that the fee would only be \$150.00.

If you have any questions, please do not hesitate to contact me.

Sincerely yours,

Joe S. Larmon, D.V.M., President

**Enclosures** 

ref:c:win:wp6.1:jslpaubr00