FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED
95 MAY 12 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 604047 (1)

1. Corporate Name
JAMES W. POOL, D.V.M., P.A.

Principal Place of Business
5833 HALLANDALE BCH BLVD
HOLLYWOOD FL 33023

Mailing Address
5833 HALLANDALE BCH BLVD
HOLLYWOOD FL 33023

3. Date Incorporated: 01/05/1973
3a. Date Last Filed: 03/31/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
4. FEI Number: 59-1427151 — Applied For / Not Applicable
State Agent # — 22
State Agent # — 27
5. Certified Copy Requested — $8.75 Additional Fee Required
City, State — 23
City, State — 28
6. Enter Corporate Function — $5.00 May Be Added to Fees
Zip — 24
County — 25
Zip — 29
County — 30
8. Has corporation ever made an election under S. 1361(a) of the I.R.C.?

9. Name and Address of Current Registered Agent
POOL, JAMES W.
5833 HALLANDALE BEACH BLVD
HOLLYWOOD FL 33023

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Designation of Registered Agent/Registered Office. Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE

12. Officer and Director Data

Title	P
Name	POOL, JAMES W.
Address	5833 HALLANDALE BCH BLVD
City	HOLLYWOOD FL
Title	S
Name	POWELL, KEITH W.
Address	1405 N. STATE ROAD 7
City	HOLLYWOOD FL
Title	T
Name	O'CONNELL, DEWAYNE V.
Address	2621 S. STATE ROAD 7
City	HOLLYWOOD FL

13. Additional Officers and Directors

S Nancy L. Pool
3920 Wilson St.
Hollywood, FL 33021

T Joe M. Pool
100 Williams St
Milton, FL 32570

14. I hereby certify that the information indicated on this report or supplement is true and accurate and that my electronic signature shall have the same force and 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 Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or in the articles of incorporation on file with the Department of State.

SIGNATURE: James W. Pool PRES PA — 5-12-95 — 305-961-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES W. POOL DVM, PA

0095447 CP