## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # 604829**

1. Entity Name ROBERT J. MARCH, D.V.M., P.A.



**FILED** Feb 26, 2007 08:00 A Secretary of State

ce of Business BLVD. 34104 US	Mailing Address 3148 DAVIS BLVD. NAPLES, FL 34104		1	(3))
				034 (11/05)
OO NOT WRITE	IN THIS SPA	CE	4. FEI Number 59-1496551	Applied For Not Applicable
			5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current R	egistered Agent	1		, .
ROBERT DVM IIS BLVD. FL 34104			and the control of the first of the control of the	
tions of registered agent.			J when reinstating) DATE UNIONIO 4 4 2 8 1	
E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0		ncing \$5.	. <b>00</b> мау ве   103/07/07-130042	023 150.00
T	IRECTORS			
MARCH, ROBERT 3148 DAVIS BLVD NAPLES, FL				
			DO NOT WRIT	E
			IN THIS SPACE	
	BLVD. 34104 US  ONOT WRITE  6. Name and Address of Current R  ROBERT DVM IS BLVD. FL 34104  Is named entity submits this statement for tions of registered agent.  Signature typed or printed name of registered agent and the statement for the state	BLVD. 34104 US  NAPLES, FL 34104  C. Name and Address of Current Registered Agent  ROBERT DVM IS BLVD. FL 34104  C. named entity submits this statement for the purpose of changing its register attentions of registered agent.  Signature typed or printed name of registered agent and title if applicable.  (NOTE: Register ag 1, 2007 Fee will be \$550.00  OFFICERS AND DIRECTORS  D. MARCH, ROBERT 3148 DAVIS BLVD	BLVD. 34104 US  NAPLES, FL 34104  DO NOT WRITE IN THIS SPACE  8. Name and Address of Current Registered Agent  ROBERT DVM IS BLVD. FL 34104  Signature typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent signature required tions of registered agent and title if applicable.  E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00  OFFICERS AND DIRECTORS  D MARCH, ROBERT 3148 DAVIS BLVD	BLVD. 3148 DAVIS BLVD. NAPLES, FL 34104  O1132007 No Chg-P CR2E  O1132007 No Chg-P CR2E  4. FE! Number 59-1496551  5. Certificate of Status Desired   BLVD. SOBERT DVM IS BLVD. FL 34104  DO NOT WRIT IN THIS SPACE  O1132007 No Chg-P CR2E  ONOT WRIT  SOBERT DVM IS BLVD. FL 34104  IN THIS SPACE  Signature yourd or primed name of registered agent and 180 if applicable (NOTE: Registered Agent signature required when remitating)  OATE  E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00  OFFICERS AND DIRECTORS  D  MARCH, ROBERT 3148 DAVIS BLVD.

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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 2/21/07 239 77 43701