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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 05 1998 8:00am Secretary of State

DOCUN 1. Corporation	MENI# 60494	1 8 (0)			
	MURRAY, D.V.M., P.A.	• •			
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Principal Place	cf Business	Mailing Address	,		##
3201 CRILL AVE. 3201 CRILL AVE.					
PALATKA FL 32177-4158 PALATKA FL 32177-4158					
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address				01/14/1974	T
		2a. Mailing Address		4. FEI Number	Applied For Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.			59-1500543	75 Additional	
		27			ee Required
City & State City & State					5.00 May Be
23 28					dded to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current ye	ear Intangible
24	25	29	30	Personal Property Tax due June 30. Yes	□ No
	g, Name and Address of Cur	rent Registered Agent		10. Name and Address of New Registered Agent	
MURRAY, TIM K. 81 Name					•
3201 CRILL AVENUE			82 Street	Address (P.O. Box Number is Not Acceptable)	
PALATKA FL 32177					
			83		•
			84 City	85	Zip Code
				┡┖╵	,
11. Pursuant I	o the provisions of Sections 607.0	0502 and 607.1508, Florida Statu ate of Florida, Such change was	ites, the above-named	corporation submits this statement for the purpose of changocration's board of directors. I hereby accept the appointment	ging its registered
agent. I ar	n familiar with, and accept the ob	oligations of, Section 607.0505, F	lorida Statutes.	soration o board of all overeign from a good the appointing	,
SIGNATURE					
	Signature, typed or printed name of registered		TE! Registered Agent signature		0.000
12.	PD	AND DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Ch	
NAME	MURRAY, TIM K DVM		1.2 NAME	Ronald P. Johnson	
STREET ADDRESS	3201 CRILL AVENUE		1.3 STREET ADDRESS	3201 Crill Avenue	
CITY-ST-ZIP	PALATKA FL 32177		1.4 CITY-ST-ZIP	Palatka, Fl 32177	
TITLE		DELETE	2.1 TITLE	Director	ange XX Addition
NAME			2.2 NAME	Virginia P. Murray	!
STREET ADDRESS			2.3 STREET ADDRESS	3201 Crill Avenue	
CITY - ST - ZIP			2, 4 CITY - ST - ZIP	Palatka. Fl 32177_	" = + · · • · · ·
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	3.1 TITLE	Officer - Vice President - Treas Ch	ange LX Add ion
NAME			3.2 NAME	Kelly M. Johnson	
STREET ADDRESS			3.3 STREET ADDRESS	3201 Crill Avenue	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	Palatka, Fl 32177	
TITLE		DELETE	4.1 TITLE		ange 💹 Addition
NAME			4, 2 NAME	Jennifer Marraffino	
STREET ADDRESS			4.3 STREET ADDRESS	3201 Crill Ave.	
CITY - ST - ZIP			4.4 CITY-ST-ZIP	Palatka, Fl 32177	
TITLE		☐ DELETE	5.1 TITLE	☐ Ch	ange 🔏 Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5,4 CITY-ST-ZIP		
TITLE		CELETE	6.1 TITLE	□ Ch	ange
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		ļ
CITY - ST - ZIP			6.4 CITY-ST-ZIP		
14. I hereby c	ertify that the information supplier	d with this filing does not qualify to	for the exemption state	ed in Section 119.07(3)(I), Florida Statutes. I further certify the	at 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 it made under oath; that I am a 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

328-9616