

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 644881

FILED  
Jan 24, 2011  
Secretary of State

**Entity Name:** SAXE VETERINARY SERVICES, P.A.

**Current Principal Place of Business:**

170 BISCAYNE BLVD.  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

170 BISCAYNE BLVD.  
ISLAMORADA, FL 33036

**New Mailing Address:**

FEI Number: 59-1951272      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SAXE, NANCY J., D.V.M.  
170 BISCAYNE BLVD.  
ISLAMORADA, FL 33036      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: SAXE, NANCY J  
Address: 170 BISCAYNE BLVD.  
City-St-Zip: ISLAMORADA, FL 33036

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: NANCY J. SAXE DVM

PRES

01/24/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date