

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710108

FILED
Mar 23, 2009
Secretary of State

Entity Name: PINELLAS COUNTY VETERINARY MEDICAL SOCIETY, INC.

Current Principal Place of Business:

10900 SEMINOLE BLVD.
LARGO, FL 33778

New Principal Place of Business:

Current Mailing Address:

1969 SUNSET POINT RD.
SUITE 8
CLEARWATER, FL 33765

New Mailing Address:

7791 52 ST
PINELLAS PARK, FL 33781

FEI Number: 62-1571010

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GODFREY, ERNEST
7791 52ND STREET N
PINELLAS PARK, FL 33781 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: S () Delete
Name: MORGAN, DON DR
Address: 320 INDIAN ROCKS RD
City-St-Zip: LARGO, FL 33770

Title: T () Delete
Name: GODFREY, ERNEST DR
Address: 7741 52ND ST
City-St-Zip: PINELLAS PARK, FL 33781

Title: P () Delete
Name: DANIELS, DAWN
Address: 12120 SEMINOLE BLVD
City-St-Zip: LARGO, FL 33718

Title: D () Delete
Name: SCRIBANO, DR. MARK
Address: 1401 4TH ST. N.
City-St-Zip: SAINT PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: ELDRIDGE, MIKE
Address: 2540 30 AVE NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERNEST GODFREY

T

03/23/2009

Electronic Signature of Signing Officer or Director

Date