2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2006
Secretary of State

DOCUMENT# 712752

Entity Name: SOUTHWEST FLORIDA VETERINARY MEDICAL ASSOCIATION, INC.

Current Principal Place of Business:

JEANETTE COLE
2031 BISPHAM ROAD
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

JEANETTE COLE
5837 BENEVA WOODS CIRCLE
SARASOTA, FL 34233 US

New Mailing Address:

FEI Number: 59-2316368 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COLE, JEANETTE
4637 BENEVA WOODS CIRCLE
SARASOTA, FL 34233 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: PRES ( ) Delete
Name: SMITH, THOM
Address: 5728 CLARK RD.
City-St-Zip: SARASOTA, FL 34233

Title: VP ( ) Delete
Name: COLE, JEANETTE
Address: 2031 BISPHAM RD
City-St-Zip: SARASOTA, FL 34231

Title: ST ( ) Delete
Name: ANDRE, EVELYN
Address: 6505 TAEDA DRIVE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: EVELYN ANDRE ST 08/28/2006

Electronic Signature of Signing Officer or Director — Date