

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2002 8:00 am
Secretary of State

05-23-2002 90014 041 ****61.25

DOCUMENT # 727462

1. Entity Name

ALACHUA VETERINARY MEDICAL ASSOCIATION, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

2828 NW 142ND AVE
 GAINESVILLE FL 32609-4097
 US

Mailing Address

2828 NW 142ND AVE
 GAINESVILLE FL 32609-4097
 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1450152

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DUTTON, JAMES T
 2828 NW 142ND AVE
 GAINESVILLE FL 32609

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE: PE
 NAME: DUTTON, JAMES T
 STREET ADDRESS: 2828 NW 142ND AVE
 CITY-ST-ZIP: GAINESVILLE FL 32609 Delete

TITLE: S
 NAME: NICOLETTI, PAUL
 STREET ADDRESS: 2552 SW 14TH DRIVE
 CITY-ST-ZIP: GAINESVILLE FL 32608 Delete

TITLE: D
 NAME: ROSENFELD, CINDY
 STREET ADDRESS: 4525 NW 45TH CT.
 CITY-ST-ZIP: GAINESVILLE FL 32606 Delete

TITLE: DP
 NAME: GOLDMAN, RICHARD
 STREET ADDRESS: 4209 NW 37TH PLACE
 CITY-ST-ZIP: GAINESVILLE FL 32606 Delete

TITLE: T
 NAME: ANDERSON, SUSAN
 STREET ADDRESS: PO BOX 100126
 CITY-ST-ZIP: GAINESVILLE FL 32610-0126 Delete

TITLE: PE
 NAME: HOLLADAY, LYNN
 STREET ADDRESS: 7615 SW 47TH LANE
 CITY-ST-ZIP: GAINESVILLE FL 32608 Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PRESIDENT
 NAME: DUTTON, JAMES T
 STREET ADDRESS: 2828 NW 142ND AVE
 CITY-ST-ZIP: GAINESVILLE, FL 32609 Change Addition

TITLE: S
 NAME: NICOLETTI, PAUL
 STREET ADDRESS: 2552 SW 14TH DRIVE
 CITY-ST-ZIP: GAINESVILLE, FL 32608 Change Addition

TITLE: S/T
 NAME: WOSSELMANN, MIA
 STREET ADDRESS: 6124 SW 84TH TERRACE
 CITY-ST-ZIP: GAINESVILLE, FL 32608 Change Addition

TITLE: DP
 NAME: HOLLADAY, LYNN
 STREET ADDRESS: 7615 SW 47TH LANE
 CITY-ST-ZIP: GAINESVILLE, FL 32608 Change Addition

TITLE: D
 NAME: WOODLAND, LORI
 STREET ADDRESS: 1819 SW 81ST TERRACE
 CITY-ST-ZIP: GAINESVILLE, FL 32607 Change Addition

TITLE: PE
 NAME: PEARSON, MOLLY
 STREET ADDRESS: 306 NE HWY 991
 CITY-ST-ZIP: MILANOPY, FL 32667 Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James T. Dutton
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02
 DATE

386-462-7927
 DAYTIME PHONE #

Submitted James T. Dutton Pres 6/1/02 586-462-7927

CR2E037 (9/01)