

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732753

FILED
Feb 15, 2010
Secretary of State

Entity Name: FLORIDA VETERINARY MEDICAL ASSOCIATION, INC.

Current Principal Place of Business:

7131 LAKE ELLENOR DRIVE
ORLANDO, FL 328095738

New Principal Place of Business:

Current Mailing Address:

7131 LAKE ELLENOR DRIVE
ORLANDO, FL 328095738

New Mailing Address:

FEI Number: 59-0934733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINKLE, PHILIP J EXE DIR
7131 LAKE ELLENOR DR.
ORLANDO, FL 32809 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: PD
Name: SHANK, JERRY P
Address: 3225 N ANDREWS AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: TD
Name: BASS, JOHN R
Address: 5833 S RIDGEWOOD AVE
City-St-Zip: PORT ORANGE, FL 32127

Title: D
Name: HINKLE, PHILIP J
Address: 7131 LAKE ELLENOR DR.
City-St-Zip: ORLANDO, FL 32809

Title: VPD
Name: HASSE, JAN M
Address: 4729 OLD STONE RD
City-St-Zip: SARASOTA, FL 34233

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PHILIP HINKLE

D

02/15/2010

Electronic Signature of Signing Officer or Director

Date