2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2004
Secretary of State

DOCUMENT# 733553

Entity Name: FLORIDA VETERINARY TECHNICIAN ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 21108
ST. PETERSBURG, FL 33742

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 21108
ST. PETERSBURG, FL 33742

New Mailing Address:

FEI Number: 59-1661984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATRICK, MIKE
1402 E. MOHAWK AVE.
TAMPA, FL 33604 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: D ( ) Delete
Name: POIRIER, ANNETTE
Address: 1802 42ND ST. NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

Title: D ( ) Delete
Name: EARLTINEZ, MICHELLE CVST
Address: 133-1101 W. SUNNY LANE
City-St-Zip: COCOA BEACH, FL 32931

Title: D ( ) Delete
Name: PATRICK, MIKE
Address: 1402 E. MOHAWK
City-St-Zip: TAMPA, FL 33614

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: POIRIER, ANNETTE CVT
Address: 1802 42ND ST. NORTH
City-St-Zip: ST. PETERSBURG, FL 33713

Title: D (X) Change ( ) Addition
Name: EARLTINEZ, MICHELLE CVT
Address: 133-1101 W. SUNNY LANE
City-St-Zip: COCOA BEACH, FL 32931

Title: D (X) Change ( ) Addition
Name: PATRICK, MIKE CVT
Address: 1402 E. MOHAWK
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Change (X) Addition
Name: SIZEMORE, JENNIFER CVT
Address: 5061 PALM AVE
City-St-Zip: COCOA, FL 32926

Title: D ( ) Change (X) Addition
Name: LEVI, SANDI CVT
Address: 1444 SATSUMA STREET
City-St-Zip: CLEARWATER, FL 33756

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANDI LEVI, CVT D 01/24/2004

Electronic Signature of Signing Officer or Director — Date