

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762970

FILED
Apr 03, 2012
Secretary of State

Entity Name: COLLIER COUNTY VETERINARY SOCIETY, INC.

Current Principal Place of Business:

C/O ANIMALIFE
2171 PINE RIDGE RD
NAPLES, FL 34109 US

New Principal Place of Business:

11106 ST. ROMAN WAY
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

PO BOX 1464
NAPLES, FL 34106

New Mailing Address:

11106 ST. ROMAN WAY
BONITA SPRINGS, FL 34135 US

FEI Number: 59-2327319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EISEL, RANDY DVM
2171 PINE RIDGE RD
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

PATRICK, MICHELLE H VMD, MS
11106 ST. ROMAN WAY
BONITA SPRINGS, FL 34135 US

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: MICHELLE H. PATRICK

04/03/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CARVER, DEIRDRE
Address: PO BOX 1464
City-St-Zip: NAPLES, FL 34106

Title: VP
Name: SWARTZ, BILL
Address: PO BOX 1464
City-St-Zip: NAPLES, FL 34106

Title: SEC
Name: GOTHARD, SHELLEY
Address: PO BOX 1464
City-St-Zip: NAPLES, FL 34106

Title: TREA
Name: PATRICK, MICHELLE H
Address: 11106 ST. ROMAN WAY
City-St-Zip: BONITA SPRINGS, FL 34135

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: MICHELLE H. PATRICK

TREA

04/03/2012

Electronic Signature of Signing Officer or Director

Date