

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2003 8:00 am
Secretary of State

05-06-2003 90040 032 ****70.00

DOCUMENT # 763978

1. Entity Name

EASTERN STATES VETERINARY ASSOCIATION, INC.



Principal Place of Business

**4421 NW 39TH AVE
BLDG 1-A
GAINESVILLE FL 32606
US**

Mailing Address

**4421 NW 39TH AVE.
BUILDING 1 - A
GAINESVILLE FL 32606
US**

2. Principal Place of Business

5003 SW 41ST BLVD

3. Mailing Address

5003 SW 41ST BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

GAINESVILLE FL

City & State

GAINESVILLE FL

Zip

32608

Country

USA

Zip

32608

Country

USA

4. FEI Number **59-2243237**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**F & L CORP.
200 LAURA ST.
JACKSONVILLE FL 32202**

7. Name and Address of New Registered Agent

Name

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

City

FL

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD RIPPIE, EARL H J 6717 CRESCENT BLVD. RT 130 PENNSAUKEN NJ	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DEBOWES, RICHARD 605 SE SPRING STREET PULLMAN WA 99163-2338	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIGMON, BETSY 1600 E WILLIAMS ST APEX NC	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LITTLE, CHARLOTTE 1961 KEITH LANE GRAFTON WI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEBOWES, RICHARD 605 SE SPRING STREET PULLMAN, WA 99163-2338	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D RALPH E. BARRETT 4351 WINDING WOODS FAIR OAKS, CA 95658	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Signature of Earl H. Rippe **5/24/03**

CR2E037 (10/02)

Attachment

90131019
H-763978

2003 Uniform Business Report (UBR)
Additional Page
Eastern States Veterinary Association Inc

Title	Linda Jacobson	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	291 Kings Highway		
Street Address	Brooklyn, NY 11223		
City, State, Zip			

Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Don Harris		
Street Address	12125 S Dixie Hwy		
City, State, Zip	Miami, FL 33156		

Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Phillipe Moreau		
Street Address	1, Rue Pierre Brossolette		
City, State, Zip	87000 Limoges, France		

Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Jorge Guerrero		
Street Address	10 Northriding Drive		
City, State, Zip	Pennington, NJ 08534-2914		

Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Lynne Johnson		
Street Address	10961 Burnt Mills Rd, Apt 1616		
City, State, Zip	Jacksonville, FL 32256		

Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Neill Overman		
Street Address	40 Britton Road		
City, State, Zip	Stockton, NJ 08559		

Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	Colin Burrows		
Street Address	3930 NW 33rd Place		
City, State, Zip	Gainesville, FL 32606		

Title	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
Name	David Senior		
Street Address	10528 Magnolia Lake Ave		
City, State, Zip	Baton Rouge, LA 70810		