2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 31, 2014
Secretary of State

DOCUMENT# F35297

Entity Name: MARK C. ANDERSEN, D.V.M., P.A.

Current Principal Place of Business:

4540 CLYDE MORRIS BLVD.
PORT ORANGE, FL 32129

New Principal Place of Business:

4540 CLYDE MORRIS BLVD.
PORT ORANGE, FL 32129 UN

Current Mailing Address:

4540 CLYDE MORRIS BLVD.
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 59-2104902 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANDERSEN, MARK C
4540 CLYDE MORRIS BLVD.
PT ORANGE, FL 32129 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: MARK C ANDERSEN
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DR
Name: ANDERSEN, MARK C.
Address: 4540 CLYDE MORRIS BLVD
City-St-Zip: PT ORANGE, FL 32129

Title: DR
Name: EMERSON, ALICIA S
Address: 4540 CLYDE MORRIS BLVD
City-St-Zip: PORT ORANGE, FL 32129

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

SIGNATURE: MARK C ANDERSEN DR 10/31/2014
Electronic Signature of Signing Officer or Director Date