

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F56461 (9)

1. Corporation Name

RICHARD E. SMITH, DVM, P.A.



Principal Place of Business

Mailing Address

11858 SE DIXIE HWY
~~P.O. BOX 1837~~ PLEASE DELETE
HOBE SOUND FL 33455
US

11858 SE DIXIE HWY
HOBE SOUND FL 33455
US

2. Principal Place of Business

2a. Mailing Address

21 11858 SE DIXIE HWY

26 11858 SE DIXIE HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 HOBE SOUND FLORIDA

28 HOBE SOUND FLORIDA

Zip

Country

Zip

Country

24 33455

25 US

29 33455

30 US

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

11/20/1981

3a. Date of Last Report

02/24/1995

4. FEI Number

59-2137359

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

SMITH, RICHARD E
11858 S.E. OLD DIXIE HWY.
HOBE SOUND FL 33455

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
SMITH, RICHARD E
STREET ADDRESS
11858 SE DIXIE HWY
CITY-ST-ZIP
HOBE SOUND FL

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
D
SMITH, RICHARD E
STREET ADDRESS
11858 SE DIXIE HWY
CITY-ST-ZIP
HOBE SOUND FL

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an assignment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD E. SMITH

(407) 546-2595

CR2E034 (12/95)