

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F70404**

(1)

1. Corporation Name

RICHARD D. NETZLEY, D.V.M., P.A.



Principal Place of Business

**3717 BOYNTON BEACH BLVD
C/O RICHARD D. NETZLEY, D.V.M.
BOYNTON BEACH FL 33436**

Mailing Address

**3717 BOYNTON BEACH BLVD
C/O RICHARD D. NETZLEY, D.V.M.
BOYNTON BEACH FL 33436**

3. Date Incorporated or Qualified
03/10/1982

3a. Date of Last Report
03/07/1995

2. Principal Place of Business

2a. Mailing Address

21 **3717 W. BOYNTON BEACH BLVD**

26 **3717 W. BOYNTON BEACH BLVD**

4. FEI Number
59-2167454

Applied For
Not Applicable

22 State, Apt. #, etc.
City & State

27 State, Apt. #, etc.
City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 25

29 30

8. This corporation has Liability for Intangible Tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NETZLEY, RICHARD D., D.V.M.
3717 BOYNTON BEACH BLVD
BOYNTON BEACH 33436**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
3717 W. BOYNTON BEACH BLVD.

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 602.0560 and 607.1308, 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 607.0509, Florida Statutes.

SIGNATURE

Richard D. Netzley, DVM

RICHARD D. NETZLEY, DVM

DATE **1/15/96**

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

PD
**NETZLEY, RICHARD D., D.V.M.
3717 BOYNTON BEACH BLVD
BOYNTON BEACH FL**

DELETE

DELETE

DELETE

DELETE

DELETE

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
1.2 NAME
1.1 STREET ADDRESS
1.4 CITY, ST, ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

Change Addition

3717 W. BOYNTON BEACH BLVD.

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

14. I do hereby certify that the information supplied with this report 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 change, or on an attachment with an address.

SIGNATURE:

Richard D. Netzley, DVM

RICHARD D. NETZLEY, DVM

DATE **1/15/96**

407-732-0777

CR2E034 (12/95)