

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F76953

Entity Name: MAX G. EASOM, D.V.M., P.A.

FILED
Jan 07, 2005
Secretary of State

Current Principal Place of Business:

6165 S. FLORIDA AVE.
LAKELAND, FL 33813

New Principal Place of Business:

6155 S. FLORIDA AVE.
SUITE 14
LAKELAND, FL 33813

Current Mailing Address:

6165 S. FLORIDA AVE.
LAKELAND, FL 33813

New Mailing Address:

6155 S. FLORIDA AVE.
SUITE 14
LAKELAND, FL 33813

FEI Number: 59-2183687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EASOM, MAX G
5312 LUNN RD
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

EASOM, MAX G
5312 LUNN RD
LAKELAND, FL 33811 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: MAX G. EASOM

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EASOM, MAX G,
Address: 5312 LUNN RD
City-St-Zip: LAKELAND, FL 0,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EASOM, MAX G
Address: 5312 LUNN RD
City-St-Zip: LAKELAND, FL 33811

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MAX G. EASOM

PD

01/07/2005

Electronic Signature of Signing Officer or Director

Date