## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 24 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F{

F80306

(6)

THOMAS H. FLETCHER, D.V.M., P.A.

Second Process   Seco				ng Address	iness Mailing	lace of Business	
Principal Pairs of Business   2a							
2. Principal Place of Research   2.							
Suitc, Apt #, etc.   Suitch	El Number Applied For			ailing Address	<u> </u>	al Place of Business	··a
City & State   City & Country   Zip		59-218685		uito Asil H. oto		est de coto	<b></b>
28	Certificate of Status Desired	5. Certificate of Sta		one, Apr. #, 616.	ê	pr n. o.c.	
Zip   Country   Zip   Country   Zip   Country   St. This corporation has liability for intengable   Florida Statutes   Florid		1		ity & State	···1	City & State	
25	This corporation has liability for intangible tax under s. 199.032,		Country		The state of the s		
SMITH, MICHAEL S.   107 EAST GREEN STREET   PERRY FL 32347   82   Stroat Address (P.O. Box Number is Not Acceptable)   83   84   City   FL   11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-nemed corporation submits his statement for the purpose of office or registered agent, or both, in the Stote of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appearagent Tean lambles with, and accept the originations of Section 607 0505 Priorida Statutes.   Personal Statutes	Florida Statutes	Florida Statutes	30				24
SMITH, MILTREL S.  107 F.AST OREEN STREET PERRY FL 32347  11. Pursuant to the provisions of Sections 607 9502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registrated agent, or both, in the Statu of Florida Sicch Change was authorized by the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the application of the corporation's board of directors. I hereby accept the appl	Name and Address of New Registered Agent	TIME		ed Agent			
PERRY FL 32347    83		Name	81				
Base   City   FL	D. Box Number is Not Acceptable)	Street Address (P.O. Box Number	82				
The Parsuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of 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 appearance of the purpose of 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 appearance of the purpose of office or registered agent agenture required when resistating)  12. OFFICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. IT THE  PST PLETCHER, THOMAS H 1900 SOUTH DIXIE HWY 13. SINEET ADDRESS  15. LANGE  15. LAN		*****	83		32347	EHRY FL 32347	PE
The Pursuant to the provisions of Sections 697 (9502 and 607 1508, Florada Statutes, the above-named corporation submits his statement for the purpose of officer or registered agent, or both, in the State of Florada Statutes, the above-named corporation submits his statement for the purpose of officer or registered agent, or both, in the State of Florada Statutes.  SIGNATURE  SIGNATURE  12.							
11. Parsuant to the provisions of Sections 607 (500 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of officer or registered agent, or both, in the State of Hondas, Such change was authorized by the corporation's board of directors. I hereby accept the appearance of the purpose of officer or registered agent are named with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATUR    Special Statutes	85 Zip Code	City	84				
NAME   PLETCHER, THOMAS H   1900 SOUTH DIXIE HWY   13 STREET ADDRESS   14 DIY-ST-ZP   PERRY FL   14 DIY-ST-ZP	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
1900 SOUTH DIXIE HWY	☐ Change ☐ Addition		1.1 TITLE	DELETE			TITLE
DELETE   D			1.2 NAME				
D							
NAME   STREET ADDRESS   1900 SOUTH DIXIE HWY   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP   1911	Change Addition	- 7IP		DELETE	(T PL		
1900 SOUTH DIXIE HWY   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP	C. Caller C. Modison					_	
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NAME		T- <b>Z</b> IP	2. 4 CITY-S				CHY-SL-ZIP
3.3 STREET ADDRESS   3.4 CITY-ST-ZIP	Change Addition		3.1 TITLE	☐ DELETE			TIREF
CHY - SE-28							
DELETE						56	
NAME	Change Addition	T-ZIP		DELETE			
STREET ADDRESS   4.3 STREET ADDRESS   4.4 CHY-ST-ZIP	L Onlinge L ADDAIDH			Managed of the South of the			
A 4 CITY - ST - ZIP		ADDRESS				22	
NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CHY-S1-7IP         5.4 CHY-S1-2IP           TITLE         □ DELETE         6.1 TITLE           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS		- ŽIP	4.4 CITY-SI				City-S1-ZiP
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STREET ADDRESS 6.3 STREET ADDRESS	Change LJ Addition			L DELETE			
		Address				55	
City Sty ZIP 6.4 City - Sty ZIP		1~ ZIP	6.4 CITY-ST				Crty - St - ZiP
14. I do hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes, I further 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	ion 119.07(3)(i), Florida Statutes. I further certify that the	mption stated in Section 119.07(3)(i)	for the exer	filing does not qualify f	y that the information supplied with this file	ereby certify that the in	14. I do here

SIGNATURE

What Hallitto Was THOMAS H. Fletcher, DVM 2/14/97 904-584-4233