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Secretary of State
04-21-2006 90102 028 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G61520

1. Entity Name
KIRKPATRICK VETERINARY HOSPITAL, P.A.

Principal Place of Business	Mailing Address
2401 S. ORANGE AVENUE ORLANDO, FL 32806-4543	2401 S. ORANGE AVENUE ORLANDO, FL 32806-4543

DO NOT WRITE IN THIS SPACE

02072006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2334980
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PATINO, JUAN F
2401 S. ORANGE AVENUE
ORLANDO, FL 32806

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Juan Patino, PD 4-12-2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PATINO, JUAN F
STREET ADDRESS	2401 S.ORANGE AVE.
CITY-ST-ZIP	ORLANDO, FL 328064543
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	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Juan Patino, PD 4-12-2006 407-841-3407
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

400056397

CARLA DELOACH BRYANT
ATTORNEYS & COUNSELORS AT LAW, P.A.

February 6, 2006

961520

Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

Re: Annual Business Report for Kirkpatrick Veterinary Hospital, P.A.

Dear Sir or Madam:

Enclosed please find the 2006 Uniform Business Report for Kirkpatrick Veterinary Hospital, P.A. and a check, made payable to the Florida Department of State, in the amount of one hundred fifty dollars ($150.00).

If you have any questions regarding this filing, please contact my office.

I remain

Very truly yours,

Rebekah M Kurdziel

Rebekah M. Kurdziel
For the Firm

RMK/kn
enclosures

1206 East Ridgewood Street • Orlando, Florida 32803 • Telephone: 407.740.5005, Facsimile: 407.740.5025
4404 N.W. 36th Avenue, Suite B • Gainesville, Florida 32606 • Telephone: 352.380.0275, Facsimile: 352.380.0251
PROFESSIONAL ASSOCIATION