

Kent A. Greer

(407) 774-0319

P. 3

6/22/01-90184-042-\$150.00-\$150.00

FILED

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2001 UNIFORM BUSINESS REPORT (UBR)

01 AUG 15 PM 12:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # G71171

1. Entity Name

RIVER OAKS ANIMAL HOSPITAL, P.A.

Principal Place of Business

800 MIAMI SPRINGS DR  
# KENT A. GREER  
LONGWOOD FL 32779

Mailing Address

800 MIAMI SPRINGS DR  
# KENT A. GREER  
LONGWOOD FL 32779

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2414770

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GREER, KENT A.  
800 MIAMI SPRINGS DRIVE  
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when rechartering)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

PS  
GREER, KENT A  
800 MIAMI SPRINGS DR.  
LONGWOOD FL

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

VP  
GREEN, A M  
800 MIAMI SPRINGS DR  
LONGWOOD FL 32779

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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CITY-STATE-ZIP

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STREET ADDRESS  
CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

Change Addition

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STREET ADDRESS  
CITY-STATE-ZIP

Change Addition

TITLE  
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CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

Change Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(c), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kent A. Greer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-01

Date

407-774-1515

Daytime Phone

CR2004 (1/00)

Kent A. Greer

(407) 774-0319

P.2

KENT A. GREER, D.V.M.  
AND ASSOCIATES



SWEETWATER CENTER  
800 MIAMI SPRINGS DRIVE  
LONGWOOD, FLORIDA 32779  
TELEPHONE 407-774-1515  
FAX 407-774-0388  
www.riveroaksvet.com

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## RIVER OAKS ANIMAL HOSPITAL

Katherine Harris  
Secretary of State  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

July 5, 2001

Dear Secretary Harris,

On July 3<sup>rd</sup>, I received a notice from your office that I was being assessed a penalty of \$400.00 each for the late payment of the annual corporation filing report for 2 Florida corporations, River Oaks Animal Hospital, reference number G71171, and A Clip Above, reference number P93000003509. These penalties total \$800.00.

According to my records, these reports were filed and the proper payment sent on February 15, 2001. (I immediately contacted the bank and today I was faxed a copy of the checks, front and back from my bank and I have enclosed these for your review.) The forms and payment were sent via 1<sup>st</sup> class mail by the United States Postal Service.

I have no knowledge as to the handling and delivery of the forms and payment after they were mailed. If you have the envelopes they will show that they were postmarked 2 & ½ months before the deadline of May 1, 2001. If there was any delay in the delivery of payment, it was not because of error on my part. I was shocked to receive the penalties from the State when I had done what I thought was the proper rendering of payment and even doing so 2 & ½ months before due.

I am asking that the assessment of penalties be reviewed based upon the circumstances and that the penalty be waived.

Thank you for your consideration of this matter.

Because of what may have been an error in delivery of the original documents, I am sending this via an overnight delivery service.

Sincerely,

  
Kent A. Greer