

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

FILED

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## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G71171

01 AUG 15 PM 12:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business		Mailing Address	
100 MIAMI SPRINGS DR # KENT A. GREER LONGWOOD FL 32779		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
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 _____ Zip Code _____ FL			

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 title if applicable

(NOTE: Registered Agent signature required when titling)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees		
11. OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS GREER, KENT A 800 MIAMI SPRINGS DR. LONGWOOD FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREEN, A M 800 MIAMI SPRINGS DR LONGWOOD FL 32779	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2004 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(G), 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 W. O. Greer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-01 407-774-1515

Date

Daytime Phone #

Kent A. Greer

(407) 774-0319

P.2

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



*PG Zeel*  
SWEETWATER CENTER  
800 MIAMI SPRINGS DRIVE  
LONGWOOD, FLORIDA 32779  
TELEPHONE 407-774-1515  
FAX 407-774-0388  
[www.riveroaksvet.com](http://www.riveroaksvet.com)

## 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 & 1/2 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 & 1/2 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