## **2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # G77924** 1. Entity Name COURTENAY ANIMAL HOSPITAL, INC. Principal Place of Business Mailing Address C/O GUY MAXWELL DVM C/O GUY MAXWELL DVM 2265 N. COURTENAY PKWY. 2265 N. COURTENAY PKWY. MERRITT ISLAND FL 32953 MERRITT ISLAND FL 32953 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Zip Country Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name CATTERTON, A V JR Street Address (P.O. Box Number is Not Acceptable) 1990 W NEW HAVEN AVE **STE 104** MELBOURNE FL 32904 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: Registeron Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. **PSD** TITLE De'ete TITLE MAXWELL, GUY R. NAME NAME STREET ADDRESS 4615 COQUINA RIDGE DR. STREET ADDRESS CITY-ST-ZIP City-ST-ZIP MELBOURNE FL TITLE ☐ Delete TITLE MAME MAXWELL, DEBORAH E. MAME STREET ADDRESS STREET ADDRESS 4615 COQUINA RIDGE DR.

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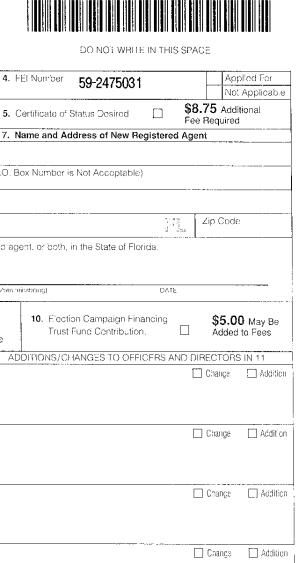
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## FILED Apr 26, 2001 8:00 am Secretary of State

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13. Thereby certify that the information supplied with this filing does not qualify 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 signature shall have the same logal effect as if made under oath; that I am an officer or cirector 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.

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