2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G97837 t. Entity Name DRS. SCARBROUGH & CARELL, D.V.M., P.A. Principal Place of Business Mailing Address 8267 S. FEDERAL HIGHWAY 8267 S. FEDERAL HIGHWAY

PORT ST. LUCIE, FL 34952

FILED Apr 29, 2004 08:00 AM Secretary of State





DO NOT WRITE IN THIS SPACE

PORT ST. LUCIE, FL 34952

Applied For 4. FEI Number 59-2393208 Not Applicable

5. Certificate of Status Desired

01082004

No Chg-P

\$8.75 Additional Fee Required

CR2E034 (10/03)

5. Name and Address of Current Registered Agent

DYER, DAVID W 325 FIFTH AVE SUITE 205 INDIALANTIC, FL 32903				*******************	and and a second second second second second	WRITE 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.							
Signature, typed or printed name of registered agent and title if applicable (NOTE. Registere FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Signature, typed or printed name of registered agent and title if applicable (NOTE. Registere) 9. Election Campaign Finar Trust Fund Contribution.			ancing	\$5.00 May Added to Fee:	Be	DATE	
10.	ÖFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CARELL, ROBERT J. 8267 S. FEDERAL HIGHWAY PORT ST. LUCIE, FL					00000140013 9204-80145-016 150.1	La la la
TITLE NAME STREET ADDRESS CITY-ST-ZIP						9204-80145-016 150.0	D
TITLE NAME STREET ADDRESS CITY-ST-ZIP				D	O NOT	WRITE	
title Name Street address City-St-Zip					N THIS	SPACE	Liezasza
TITLE NAME STREET ADDRESS CITY-ST-ZIP							· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated	certify that the information supplied with this for in this report or supplemental report is true	ling does not qualify for the ex and accurate and that my sign	emption state ature shall ha	d in Section 119 ve the same lega	.07(3)(ī), Florida S al effect as if made	tatutes. I further certify that the informate under oath; that I am an officer or dire	tion

changed, or on an attachment with an add

SIGNATURE: