

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # J34093

1. Entity Name
GREGORY VETERINARY CLINIC, INC.



Principal Place of Business
1329 WEST FLETCHER AVENUE
TAMPA, FL 33612 US

Mailing Address
1329 WEST FLETCHER AVENUE
TAMPA, FL 33612 US



01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2476861

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

GREGORY, JERRY D.
1329 W FLETCHER AVE
TAMPA, FL 33612

**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

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

(NOTE: Registering Agent signature required when renewing)

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	DP
NAME	GREGORY, JERRY D.
STREET ADDRESS	908 WOODCLIFF AVE
CITY-ST-ZIP	TAMPA, FL 33613

TITLE	V
NAME	GREGORY, JANICE B
STREET ADDRESS	908 WOOD CLIFF AVENUE
CITY-ST-ZIP	TAMPA, FL 33613

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/02/06-80011-022 150.00

**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: *Janice B. Gregory* **JANICE B. Gregory** *7/16/2006* **(813) 727-6151**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #