

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J75164

FILED  
Apr 19, 2005  
Secretary of State

**Entity Name:** GULF SHORE ANIMAL HOSPITAL, DAVID R. BALL, D.V.M., P.A.

**Current Principal Place of Business:**

3560 TAMiami TRAIL N  
NAPLES, FL 33940

**New Principal Place of Business:**

3560 TAMiami TRAIL N  
NAPLES, FL 34103

**Current Mailing Address:**

3560 TAMiami TRAIL N  
NAPLES, FL 33940

**New Mailing Address:**

3560 TAMiami TRAIL N  
NAPLES, FL 34103

**FEI Number:** 59-2807965

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BALL, DAVID R.  
3560 TAMiami TR NO  
NAPLES, FL 33940 US

**Name and Address of New Registered Agent:**

BALL, DAVID R.  
3560 TAMiami TR NO  
NAPLES, FL 34103 US

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: DAVID R. BALL

04/19/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BALL, DAVID R.,  
Address: 1655 3RD STREET S.  
City-St-Zip: NAPLES, FL 33940

Title: VT ( ) Delete  
Name: SCHEMMER, KIM R.,  
Address: 1655 3RD STREET S.  
City-St-Zip: NAPLES, FL 33940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BALL, DAVID R.,  
Address: 1655 3RD STREET S.  
City-St-Zip: NAPLES, FL 34103

Title: VT (X) Change ( ) Addition  
Name: SCHEMMER, KIM R.,  
Address: 1655 3RD STREET S.  
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID R. BALL

P

04/19/2005

Electronic Signature of Signing Officer or Director

Date