

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 08:00 AM
Secretary of State

DOCUMENT # J84050

1. Entity Name
JENNIFER L. FORTUNE, DVM, P.A.



Principal Place of Business
**509 E JOHN SIMS
 NICEVILLE, FL 32578**

Mailing Address
**509 E JOHN SIMS
 NICEVILLE, FL 32578**



07052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2862315** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**FORTUNE, JENNIFER F
 509 E. JOHN SIMS PKWY
 NICEVILLE, FL 32578**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FORTUNE, JENNIFER F 509 E JOHN SIMS PKWY NICEVILLE, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAVIS, STEPHEN W 4732 CONNOR DR CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GREENE, ASHLEY 4671 PALMETTO CT CRESTVIEW, FL 32539
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 of the corporation 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:

7.6.06