## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** 

SIGNATURE:

Apr 27 1998 8:00am CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3) J98654 BAY ANIMAL HOSPITAL, INC. Principal Place of Business Mailing Address C/O RANDY DEAN EUBANKS C/O RANDY DEAN EUBANKS 2003 E. BUSINESS HWY. 98 2009 E. BUSINESS HWY. 98 PANAMA CITY FL 32401 PANAMA CITY FL 32401 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/20/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2833814 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ 23 28 Trust Fund Contribution Added to Fees Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Country Ζıp Country 29 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent o. Name and Address of New Register Name EUBANKS, RANDY DEAN 2003 E. BUSINESS HWY. 98 Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32401 83 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Plorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with anglacing this chiligations of, Section 607.0505, Florida Statutes. hen reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change ☐ Addition **EUBANKS, RANDY DEAN** NAME 1.2 NAME 3537 E 43RD STREET STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition **EUBANKS, LINDA** NAME 2.2 NAME 3537 E 43RD STREET STREET ADDRESS 2.3 STREET ADDRESS PANAMA CITY FL CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE BALL, JAMES H. NAME 3.2 NAME RT. 1, BOX 1351 STREET ADDRESS 3.3 STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 3 4. CiTY-ST-ZiP TITLE DELETE 4.1 TITLE Addition HAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. I hereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an order of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a trust of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a trust of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a trust of the receiver of

RANDY EUBANKS Pro

FLORIDA DEPARTMENT OF STATE

**FILED**