2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# K96511

Entity Name: FLORIDA MOBILE VETERINARY CLINIC, INC.

Current Principal Place of Business:

8500 4TH STREET N.
ST. PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

8500 4TH STREET N.
ST. PETERSBURG, FL 33702 US

New Mailing Address:

FEI Number: 59-2958704 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANTHONY, DAVID L.
9940 57TH WAY NORTH
PINELLAS PARK, FL 34665 US

Name and Address of New Registered Agent:

ANTHONY, DAVID L.
9940 57TH WAY NORTH
PINELLAS PARK, FL 33782 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: 02/12/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ANTHONY, DAVID DR. D, .V M
Address: 8500 4TH STREET N.
City-St-Zip: ST. PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: STEFANNE KELLEY MRS 02/12/2009
Electronic Signature of Signing Officer or Director Date