Apr 13, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L75149

	EDINGTON, D.V.M., P.A.								
Principal Plac	e of Business	Mailing Address				T EMMIEMIT MIT SOUND METON SENIE	#1818 IBII WIBII BI		D)\${ G G
% JERRY L EC	DINGTON	% JERRY L EDINGTO	N						
4089 S MCCALL RD 4089 S MCCALL RD FINCIPAL STATE OF THE S			١4			DO NOT WE	RITE IN THIS	SPACE	
ENGLEWOOD FL 34224 ENGLEWOOD FL 34224			24		1	Date incorporated or Qualifed		J-AOL	}
						05/21/1990	•		
2. Principal P	lace of Business	2a. Mailing Address		, ,		FEI Number		Ap	plied For
21		26				<u>65-0199765 </u>			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certifcate of Status Desired		\$8.75 A	,
22 City & Stat	10	City & State			6	Election Campaign Financing		\$5.00	
23		28				Trust Fund Contribution	'	Added t	
Zip	Country 25	Zip 29	30	intry	L L	This corporation owes the cu Personal Property Tax.		ngible []] Yes	□No
24	9. Name and Address of Currer		[30]	Γ.		Name and Address of New	Registered A	gent	
	J. Hallic alia Madrood of Garret	giotoroa / igom	_	81 Name				<u> </u>	
	NGTON, JERRY L.			99 Chart A	Valadana and ID	O. Bay Number is Not Asses	table)		
4089 S MCCALL RD			82 Street Add		Address (P.	O. Box Number is Not Accep	itable)		
ENG	GLEWOOD FL 34224	•		83					
				24 87			•	85 Zip (Cada
				84 City			FL	85 Zip (Lode
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS