

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90041 024 ***150.00

DOCUMENT # P00000066580

1. Entity Name

R & K VETERINARY SERVICES, P.A.

Principal Place of Business

**1334 U.S. 19 N
HOLIDAY FL 34691**

Mailing Address

**1334 U.S. 19 N
HOLIDAY FL 34691**

927878



2. Principal Place of Business

1334 U.S. Hwy 19 N

Suite, Apt. #, etc.

3. Mailing Address

1334 U.S. Hwy 19 N

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

HOLIDAY FL

City & State

HOLIDAY FL

4. FEI Number

59-3659337
~~59-0050124~~

Applied For

Not Applicable

Zip

34691

Country

PASCO

Zip

34691

Country

PASCO

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BROCKWAY, GEORGE R

1334 U.S. 19 N

HOLIDAY FL 34691

7. Name and Address of New Registered Agent

Name

BROCKWAY, GEORGE R

Street Address (P.O. Box Number is Not Acceptable)

1334 U.S. Hwy 19 N.

City

HOLIDAY

FL

Zip Code

34691

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.

SIGNATURE George R Brockway
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **BROCKWAY, GEORGE R**
STREET ADDRESS **1334 US 19 N**
CITY-ST-ZIP **HOLIDAY FL 34691**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **BROCKWAY, GEORGE R**
STREET ADDRESS **1334 U.S. Hwy 19 N**
CITY-ST-ZIP **HOLIDAY, FL 34691**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: George R Brockway **GEORGE R. BROCKWAY**

Date

1/29/02

Daytime Phone

787-938-6879

CR2E034 (9/01)