

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000092916

FILED  
Mar 22, 2003  
Secretary of State

**Entity Name:** AMERICAN SOCIETY OF VETERINARY DENTAL TECHNICIANS, INC.

**Current Principal Place of Business:**

316 SHORE RD.  
VENICE, FL 342853725

**New Principal Place of Business:**

**Current Mailing Address:**

316 SHORE RD.  
VENICE, FL 342853725

**New Mailing Address:**

**FEI Number:** 59-3676578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SELIN, GERARD B  
316 SHORE RD  
VENICE, FL 34285 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: SELIN, GERARD B  
Address: 316 SHORE RD  
City-St-Zip: VENICE, FL 34285

Title: VD ( ) Delete  
Name: DAVIDNIEISEN, DVM  
Address: 1401 N SEPULVEDA  
City-St-Zip: MANHAN BCH, CA 90265

Title: VD ( ) Delete  
Name: BELLOWS DVM, JAN  
Address: 17100 ARVIDA PKWY  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GERARD B. SELIN

PTD

03/22/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date