FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am Secretary of State

DO NOT WRITE IN THIS SPACE 2. Principal Place of Business	05-28-2002 91747 037 ***150.00				DOCUMENT # PO10000 25404 1. Entity Name Coconut Coast Veterinary Services					
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.				No.	3 - 1,				\$100 m	
The above named cattly submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature bycot or presed name of registered agent and the Happicable. 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) The Director Campaign State Signature bycot or presed name of registered agent and the Happicable. Make Check Payable to Department of State Signature on back) DATE Signature bycot or presed name of registered agent and the Happicable. Make Check Payable to Department of State Trust Fund Contribution. Signature of Florida. 11. OFFICERS AND DIRECTORS Make Check Payable to Department of State Title NAME Sirect Address (F.O. Box Number is Not Acceptable) ### Composition is eligible to satisfy its Intangible Admended URB is \$61:25 Make Check Payable to Department of State Trust Fund Contribution. Added to F. Title NAME Sirect Address Sirect Address of Current Registered Agent ### Composition is eligible to satisfy its Intangible Added to F. Signature bycot or presed name of registered agent and the Happicable. Make Check Payable to Department of State Trust Fund Contribution. Added to F. Sirect Address (F.O. Box Number is Not Acceptable) #### Payable to Department of State Trust Fund Contribution. Added to F. Sirect Address of Current Registered Agent #### Payable to Department of State 11. OFFICERS AND DIRECTORS #### Payable to Department of State Sirect Address of Current Registered Agent #### Payable to Department of State 12. OFFICERS AND DIRECTORS ##### Payable to Department of State #### Payable to Department of State #### Payable to Department of State ##### Payable to Department of State ##### Payable to Department of State #### Payable to Department of State #####		NCE	DO NOT WRITE IN THIS SPACI		Ν.	601 11+hAve		1th Ave	6011	
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IN THIS SPACE City In Bulk FL Zip Code 331 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 Signature typed or printed name of registered agent and life if applicable. 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) OFFICERS AND DIRECTORS TIRE NAME STREET ADDRESS CITY ST- ZIP TITLE NAME NAME NAME NAME STREET ADDRESS CITY ST- ZIP TITLE NAME			0 .	_	Name					
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11. OFFICERS AND DIRECTORS THE Cameron A Abboth STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM		\$5.00 May E	ansating) DATE 10. Election Campaign Financing	o.go	: Registered Agent signals ay 1- Fee is \$150 1, Fee is \$550.00 I UBR is \$61.25	ule il appicable. (NOTE January 1 - M After May Amended	r printed name of registered agent and ble to satisfy its Intangible	Signature, typed or portation is eligible equirement and	9. This corpo	
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SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/02 904-270-0928