

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090606

FILED
Jul 21, 2004
Secretary of State

Entity Name: CHIEFLAND VETERINARY SERVICES, P.A.

Current Principal Place of Business:

153 NW 128 LANE
7651 NW 128 LANE
CHIEFLAND, FL 32626 US

New Principal Place of Business:

7850 NW 128 LANE
CHIEFLAND, FL 32626 US

Current Mailing Address:

C/O DR. KICHERER
P.O. BOX 1756
CHIEFLAND, FL 32644 US

New Mailing Address:

DR. NANCY KICHERER
P.O. BOX 1756
CHIEFLAND, FL 32644 US

FEI Number: 81-0582097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KICHERER, NANCY E D.V.M.
C/O AL GRAVES
7651 NW 128 LANE
CHIEFLAND, FL 22626

Name and Address of New Registered Agent:

KICHERER, NANCY E D.V.M.
7850 NW 128 LANE
CHIEFLAND, FL 22626

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:

07/21/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: KICHERER, NANCY E D.V.M.
Address: 153 128 LANE N.W.
City-St-Zip: CHIEFLAND, FL 32626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: KICHERER, NANCY E D.V.M.
Address: 7850 NW 128 LANE
City-St-Zip: CHIEFLAND, FL 32626

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: NANCY E KICHERER DVM

VET

07/21/2004

Electronic Signature of Signing Officer or Director

Date