

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000064619

Entity Name: CLEMONS DVM INC.

**FILED**  
**Feb 11, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1710 ARIZONA AVE.  
FT. PIERCE, FL 34982

**New Principal Place of Business:**

**Current Mailing Address:**

1710 ARIZONA AVE.  
FT. PIERCE, FL 34982

**New Mailing Address:**

FEI Number: 68-0584813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KALIDONIS, GEORGE J  
1140 FLEETWOOD LANE  
FT. PIERCE, FL 34982 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: PD  
Name: CLEMONS, BURCHELL J  
Address: 1710 ARIZONA AVE.  
City-St-Zip: FT. PIERCE, FL 34982

I hereby 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 all other like empowered.

SIGNATURE: BURCHELL CLEMONS

PD

02/11/2010

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

\_\_\_\_\_  
Date