

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000019021

Entity Name: ELIZABETH NOVY DVM, P.A.

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

14741 SW 84TH CT.  
PALMETTO BAY, FL 33158

**New Principal Place of Business:**

**Current Mailing Address:**

14741 SW 84TH CT.  
PALMETTO BAY, FL 33158

**New Mailing Address:**

FEI Number: 27-2039833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NOVY, ELIZABETH  
14741 SW 84TH CT.  
PALMETTO BAY, FL 33158 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

**OFFICERS AND DIRECTORS:**

Title: PVST  
Name: NOVY-CHATFIELD, ELIZABETH  
Address: 14741 SW 84TH CT.  
City-St-Zip: PALMETTO BAY, FL 33158

Title: D  
Name: NOVY-CHATFIELD, ELIZABETH  
Address: 14741 SW 84TH CT.  
City-St-Zip: PALMETTO BAY, FL 33158

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: ELIZABETH NOVY-CHATFIELD

PVST

04/19/2011

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

\_\_\_\_\_  
Date