FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 14 1998 8:00am Secretary of State

DOUGLAS K. DAMPIER, D.V.M., P.A)		ORI ZHÂL WILL HEL HEL
Principal Place of Business	Mailing Address		1 10 0 11 10 10 11 10 11 10 11 10 11 10 11 11	athi Alles tilli 1861 1881
2800 LAKE WASHINGTON RD MELBOURNE FL 32935	2800 LAKE WASHINGTO MELBOURNE FL 32935	N RD		
U\$	US		DO NOT WRITE IN THIS SPA	ACE
			3. Date Incorporated or Qualified 12/07/1992	
2. Principal Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21	26		59-3155377	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the current	· — ·
24 25 25 S. Name and Address of Current F	29	30	Personal Property Tax due June 30.	
	redistered whent	81 Name	10. Name and Address of New Registered Ag	9711
COBB, KATHERINE M 777 N HWY A1A			de con (D.O. Dou Nillember le Not Assentable)	· ·
STE 202		82 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
INDIALANTIC FL 32903		83		
		84 City		85 Zip Code
Ad Director to the grouping of Captions 607.0502	and 607 1609 Florido Statut	an the share samed a	FL (anning the registered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation	Florida: Such change was a ons of, Section 607.0505, Florida	es, the above-harned co authorized by the corpo orida Statutes.	orporation submits this statement for the purpose of characters to be or the submit of directors. I hereby accept the appoint	tment as registered
SIGNATURE Signature, typed or pointed name of registered agent a	nd tile (aprojeable (NOT	E: Registered Agent signature re	outred when reinstating) DATE	———— l_
12. OFFICERS AND E		13.	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE D	☐ DELETE	1.1 TITLE		RECTORS IN 12 Change Addition
NAME DAMPIER, DOUGLAS K		1.2 NAME		[2
STREET ADDRESS CITY-ST-ZIP 2800 LAKE WASHINGTON RD MELBOURNE FL		1.3 STREET ADDRESS		Į,
TITLE MELBOURNE FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition C
NAME		2.2 NAME	_	
STREET ADDRESS		2.3 STREET ADDRESS		ľ
CITY-ST-ZIP		2 4 City-ST-ZIP		
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		4. 2 NAME		,
STREET ADDRESS		4.3 STREET ADDRESS		•
CITY-ST-ZIP				
Britis P		4.4 CITY-ST-ZIP		
THE .	DELETE	5 1 TITLE		Change Addition
NAME	☐ DELETE	5.1 TITLE 5.2 NAME		Change Addition
MAME STREET ADDRESS	DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition
MAME STREET ADDRESS CITY-ST-ZIP	_	51 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
MAME STREET ADDRESS CITY-ST-ZIP TIFLE	☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 6.1 LITLE		Change Addition
MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	_	51 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		
MAME STREET ADDRESS CITY-ST-ZIP TIFLE	_	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 6.1 LITLE		

indicated on this annual report or suppliemental annual report is frue and accurate and that my signature shall have the same legal effect as if made under outh; 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Danger Hangen

4/7/98 407259.8770