2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000077880

Entity Name: ANITA S. HOLT, V.M.D., P.A.

FILED Jan 31, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1851 TAMIAMI TRAIL 1851 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33948

Current Mailing Address: New Mailing Address:

1851 TAMIAMI TRAIL 1851 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33948

FEI Number: 65-0446261 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOLT, ANITA S HOLT, ANITA S VMD 1851 TAMIAMI TRAIL 1851 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33952 US PORT CHARLOTTE, FL 33948 US

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: ANITA S. HOLT, VMD 01/31/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: HOLT, ANITA S Name: HOLT, ANITA S Address: 1851 TAMIAMI TRAIL Address: 1851 TAMIAMI TRAIL

City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33948

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: ANITA S. HOLT, VMD D 01/31/2004