

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000027025

FILED
Feb 27, 2009
Secretary of State

Entity Name: ALL FLORIDA VETERINARY LABORATORY, INC.

Current Principal Place of Business:

6406 SW 170 STREET
ARCHER, FL 32618

New Principal Place of Business:

Current Mailing Address:

6406 SW 170 STREET
ARCHER, FL 32618

New Mailing Address:

FEI Number: 59-2264662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, EDWARD
6404 SW 170 STREET
ARCHER, FL 32618 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 () Delete
Name: REED, EDWARD
Address: 6406 SW 170 ST.
City-St-Zip: ARCHER, FL

Title: STD () Delete
Name: REED, PEGGY
Address: 6406 SW 170 ST.
City-St-Zip: ARCHER, FL 32618

Title: VPD () Delete
Name: REED, NICK
Address: 18325 S W 15 AVE.
City-St-Zip: NEWBERRY, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NICK E. REED

VP

02/27/2009

Electronic Signature of Signing Officer or Director

Date