

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000066830

**FILED**  
**Aug 28, 2012**  
**Secretary of State**

**Entity Name:** MARGARET NEWMAN-BIGGS, DVM, P.A.

**Current Principal Place of Business:**

12798 W FOREST HILL BLVD  
STE 103  
WEST PALM BEACH, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

12798 W FOREST HILL BLVD  
STE 103  
WEST PALM BEACH, FL 33414

**New Mailing Address:**

**FEI Number:** 65-0515047

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWMAN-BIGGS, MARGARET  
12798 W FOREST HILL BLVD  
SUITE 103  
WEST PALM BEACH, FL 33414 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: DVM  
Name: NEWMAN-BIGGS, MARGARET  
Address: 14858 EQUESTRIAN WAY  
City-St-Zip: WEST PALM BEACH, FL 33414

Title: DR.  
Name: NEWMAN-BIGGS, MARGARET  
Address: 14858 EQUESTRIAN WAY  
City-St-Zip: WEST PALM BEACH, FL 33414

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: M.E.NEWMAN-BIGGS

PRES

08/28/2012

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

\_\_\_\_\_  
Date