

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Feb 18 1997 8:00 am**  
Secretary of State

**DOCUMENT # P96000077555 (6)**

1. Corporation Name

~~VETSOURCE, INC.~~

VETS' ON-LINE, INC. (f/k/a VETSOURCE, INC.)

NC  
1/23/97



Principal Place of Business

3502 HENDERSON BLVD  
2ND FLOOR  
TAMPA FL 33609

Mailing Address

3502 HENDERSON BLVD  
2ND FLOOR  
TAMPA FL 33609-3947

3. Date Incorporated or Qualified  
**09/17/1996**

3a. Date of Last Report  
**N/A**

2. Principal Place of Business

21 611 N.W. 31st Ave.

2a. Mailing Address

26 533 S. Howard Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Pompano Beach, FL

27 #8-33

28 Tampa, FL

24 Zip

33609

25 Country

USA

29 Zip

33606

30 Country

USA

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WHITE, DANIEL T  
3502 HENDERSON BLVD  
2ND FLOOR  
TAMPA FL 33609

10. Name and Address of New Registered Agent

81 Name

Daniel T. White, Esq.

82 Street Address (P.O. Box Number is Not Acceptable)

17110 Carrington Park Dr., #822

83

84 City

Tampa

85 FL

85 Zip Code  
33647

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Daniel T. White Esq. 2/12/97

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

D, C  
Daniel T. White  
17110 Carrington Park Dr., #8-22  
Tampa, FL 33647

☐ Change ☒ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

D, V  
John D'Onofrio  
540 Carillon Pkwy, #1112  
St. Petersburg, FL 33716

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

D, P  
Gerry Snyder  
611 N.W. 31st Ave.  
Pompano Beach, FL 33069

☐ Change ☒ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Pompano Beach, FL 33069

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Pompano Beach, FL 33069

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Pompano Beach, FL 33069

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel T. White, Chairman 2/12/97

813/221-0231

Date

Daytime Phone #

CR2E034 (9/96)