2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2006
Secretary of State

DOCUMENT# P98000053652

Entity Name: ARCHIE KLEOPFER D.V.M. P.A.

Current Principal Place of Business:

1847 ARAGON AVE
STE 1
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

1847 ARAGON AVE
STE 1
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 65-0864479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KLOEPFER, ARCHIE DVM PA
215 GRAY ST.
W. PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

KLEOPFER, ARCHIE DVM PA
215 GRAY ST.
W. PALM BEACH, FL 33405 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: ARCHIE KLEOPFER 01/18/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ARCHIE, KLEOPFER
Address: 215 GRAY ST
City-St-Zip: WEST PALM BCH, FL 33405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ARCHIE KLEOPFER P 01/18/2006
Electronic Signature of Signing Officer or Director Date