

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000055807

FILED
Apr 28, 2003
Secretary of State

Entity Name: PONTE VEDRA ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

28 CORNONA ROAD
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

28 CORNONA ROAD
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 59-3519524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEFFEY, FRED H
6620 SOUTHPOINT DRIVE SOUTH, #300
JACKSONVILLE, FL 322160913 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: DP () Delete
Name: HILL, DARRYL B
Address: 28 CORNONA ROAD
City-St-Zip: PONTE VERDA, FL 32082

Title: DVPS () Delete
Name: HILL, IRIS E
Address: 28 CORNONA ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: D () Delete
Name: FLOOD, BRYAN K V.M.D.
Address: 28 CORNONA ROAD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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 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: IRIS E HILL

DVPS

04/28/2003

Electronic Signature of Signing Officer or Director

Date