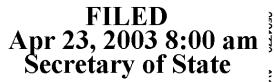
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P99000056296 DOCUMENT



1. Entity Name LAKELAND VETERINARY SERVICES, INC.							04-23-2003 90127 018 ***150.00				
Principal Plac 2225 DRANE LAKELAND FI	FIELD ROAD		Mailing Address 2225 DRANE FIELD ROAD LAKELAND FL 33811								
2. Principal F	Place of Busin	ness	3. Mailing Address					10 12 61 1 61			
Suite, Apt.	. #, etc.	***************************************	Suite, Apt. #, etc.				CHECK HER	E IF MAKING (CHANGES		
City & Stat	te		City & State			1 99743043014				oplied For ot Applicable	
Zip Country			Zip	Cour	itry	5. Certificat	e of Status Desired	□ \$	8.75 Add	ditional	
	6. Name	and Address of Current	Registered Agent	·	7. Name and Address of New Registered Agent						
					Name						
	, sam d dv Ne field 1			Street Address			per is Not Acceptab	le)			
	D FL 33811									,	
					City		FL Zip Code				
B. The above the obligat	tions of regist	ered agent	the purpose of changing its	~							
SIGNATURE .		r i Tur	nd title it applicable. (NOT	· · .	# 1 PE + \$1.	Jan Donage	m to the gard	DATE	,	<u> </u>	
After	r May 1, 200	! FEE IS \$150,00 3 Fee will be \$550.00 Florida Department of	i				lection Campaign F rust Fund Contributi			0 May Be I to Fees	
10.		OFFICERS AND I	DIRECTORS	11.		ADDITIONS	CHANGES TO OF	FICERS AND E	PIRECTOR	S IN 11	
TITLE NAME Street address City-St-Zip		SAM D EVIEW DRIVE WEST OFL 33813	☐ Delete					{	Change	Addition	
TITLE Name Street address City-St-Zip		JULIE A EVIEW DRIVE WEST D'FL*33813	☐ Delete		l l		ه سه همده سیستنس ی غیدنمه :		Change	Addition	
IITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					[Change	Addition	
ITLE IAME STREET ADDRESS SITY-ST-ZIP			☐ Delete		1			[Change	Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		****	☐ Delete					[Change	☐ Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP		n	□ Delete	TITLE NAME STRE				[Change	☐ Addition	
O											

bes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director earlier this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if like empowered. I hereby certify that the information s indicated on this report or suppleme of the corporation or the receiver or changed, or on an attachment with

SIGNATURE:

O. MEISLER PRES.

863 646 3669