

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000056648

FILED
Mar 24, 2006
Secretary of State

Entity Name: CAROLINE M. MCCASHION, DVM, P.A.

Current Principal Place of Business:

10937 STATE RD 52
HUDSON, FL 34669

New Principal Place of Business:

Current Mailing Address:

10937 STATE RD 52
HUDSON, FL 34669

New Mailing Address:

FEI Number: 59-3584218

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCASHION, CAROLINE M DVM
37662 BEAUCHAMP AVE.
DADE CITY, FL 33523 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: D () Delete
Name: MCCASHION, CAROLINE M DVM
Address: 37662 BEAUCHAMP AVE.
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MCCASHION, CAROLINE M DVM
Address: 37662 BEAUCHAMP AVE.
City-St-Zip: DADE CITY, FL 33523

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: CAROLINE M. MCCASHION DV M

PRES

03/24/2006

Electronic Signature of Signing Officer or Director

Date