


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 27, 2006 08:00 AM
Secretary of State**

DOCUMENT # P99000110291 1. Entity Name SARAH E. GUTTERY, D.V.M., P.A.	
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Principal Place of Business SHOPPES OF COCOA NORTH 2300 ST. RD. 524, UNIT 108 COCOA, FL 32926	Mailing Address SHOPPES OF COCOA NORTH 2300 ST. RD. 524, UNIT 108 COCOA, FL 32926
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01082006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3614556	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUTTERY, SARAH E
SHOPPES OF COCOA NORTH
2300 ST. RD. 524, UNIT 108
COCOA, FL 32926

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTTERY, SARAH E SHOPPES OF COCOA NORTH 2300 ST RD 524 #108 COCOA, FL 32926
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARRETT, JOHN W SR SHOPPES OF COCOA NORTH 2300 ST RD 524 #108 COCOA, FL 32926
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05/09/06-80115-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John W. Garrett JOHN W. GARRETT 4/23/06 321-636-2230
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #