2005 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED **DOCUMENT # S02845** Jan 28, 2005 08:00 AM MARY FRANCES H. CARTER, D.V.M., P.A. **Secretary of State** Principal Place of Business Mailing Address 3514 MAHAN DRIVE 3514 MAHAN DRIVE TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32308 01202005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3032405 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CARTER, MARY FRANCES H. DO NOT WRITE 3514 MAHAN DRIVE TALLAHASSEE, FL 32308 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or original game of projetered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE CARTER, MARY FRANCES H. NAME STREET ADDRESS 3514 MAHAN DRIVE CITY-ST-ZIP TALLAHASSEE, FL เป้าเป็นได้แหน TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIF TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this fifing does not qualify 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 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 employeed to execute this report as required/by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if