2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S13867

Entity Name: FRANKIE G. DUPRE, D.V.M., P.A.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3307 RAILROAD ST.

FT. MYERS, FL 33916

3307 RAILROAD STREET
FORT MYERS, FL 33916

Current Mailing Address: New Mailing Address:

3307 RAILROAD ST.

5307 RAILROAD STREET
51. MYERS, FL 33916

5307 RAILROAD STREET
51. MYERS, FL 33916

5307 RAILROAD STREET
51. MYERS, FL 33916

FEI Number: 65-0224038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUPRE, FRANKIE G.
3307 RAILROAD STREET
FT. MYERS, FL 33916 US

DUPRE, FRANKIE G.
3307 RAILROAD STREET
FORT MYERS, FL 33916 US

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: 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PDS
 () Delete

 Name:
 DUPRE, FRANKIE G., DVM

 Address:
 3307 RAILROAD ST

 City-St-Zip:
 FT. MYERS, FL

 Title:
 T
 () Delete

 Name:
 DUPRE, FRANKIE G., DVM

 Address:
 3307 RAILROAD STREET

City-St-Zip: FT. MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: DUPRE, FRANKIE G., DVM
Address: 3307 RAILROAD STREET
City-St-Zip: FORT MYERS, FL 33916

Title: T (X) Change () Addition

Name: DUPRE, FRANKIE G., DVM Address: 3307 RAILROAD STREET City-St-Zip: FORT MYERS, FL 33916

I hereby certify that the information supplied with this filing does not qualify 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: FRANKIE G. DUPRE PRES 04/28/2009