2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2009
Secretary of State

DOCUMENT# P05000167838

Entity Name: KB VET, P.A.

Current Principal Place of Business:

14512 GATORLAND DRIVE
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

14512 GATORLAND DRIVE
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 20-4029516 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BAYER, MATTHEW D
954 WILLOW GROVE STREET
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

BAYER, MATTHEW D
4116 LAKE CONWAY WOODS BLVD.
ORLANDO, FL 32812 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: MATTHEW D. BAYER 06/26/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: KIRVEN, JOSEPH
Address: 1129 W. YALE STREET
City-St-Zip: ORLANDO, FL 32804

Title: DVS ( ) Delete
Name: BAYER, MATTHEW D
Address: 954 WILLOW GROVE STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DVS (X) Change ( ) Addition
Name: BAYER, MATTHEW D
Address: 4116 LAKE CONWAY WOODS BLVD.
City-St-Zip: ORLANDO, FL 32812

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: JOSEPH KIRVEN DPT 06/26/2009
Electronic Signature of Signing Officer or Director Date