

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732631

Entity Name: BREVARD COUNTY VETERINARY MEDICAL ASSOCIATION, INC.

FILED
May 18, 2017
Secretary of State
CC9873850589

Current Principal Place of Business:

7620 NORTH ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920

Current Mailing Address:

7620 NORTH ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920 US

FEI Number: 59-1682671

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SLOAN-WADE, KELLY J DR.
4710 SEMINOLE TRAIL
MERRITT ISLAND, FL 32953 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: KELLY SLOAN-WADE, DVM

05/18/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name STORTS, CHRISTINE M DR.
Address 7620 NORTH ATLANTIC AVENUE
City-State-Zip: CAPE CANAVERAL FL 32920

Title DT
Name LAWRENCE, DARIEN DR.
Address 7730 NORTH WICKHAM ROAD
SUITE 108
City-State-Zip: MELBOURNE FL 32940

Title DS
Name EVAN, SONES DR.
Address 7620 NORTH ATLANTIC AVENUE
City-State-Zip: CAPE CANAVERAL FL 32920

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTINE M.STORTS, DVM

PRESIDENT

05/18/2017

Electronic Signature of Signing Officer/Director Detail

Date