

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 462595

Entity Name: MARK W. COLEMAN, D.V.M., AND ASSOCIATES, P.A.

Current Principal Place of Business:

3831 NEWBERRY ROAD
GAINESVILLE, FL 32607

Current Mailing Address:

3831 NEWBERRY ROAD
GAINESVILLE, FL 32607

FEI Number: 59-1551420

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COLEMAN, MARK W
3831 NEWBERRY ROAD
GAINESVILLE, FL 32607 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VPT	Title	PS
Name	COLEMAN, MELINDA	Name	COLEMAN, MARK
Address	3831 NEWBERRY RD	Address	3831 NEWBERRY RD
City-State-Zip:	GAINESVILLE FL 32607	City-State-Zip:	GAINESVILLE FL 32607

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

SIGNATURE: MARK W. COLEMAN

HOSPITAL DIRECTOR

04/08/2016

Electronic Signature of Signing Officer/Director Detail

Date