

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 475788

Entity Name: RAWLS VETERINARY HOSPITAL, INC.

Current Principal Place of Business:

127 EAST MASON AVE.
DAYTONA BEACH, FL 32117-5034

Current Mailing Address:

635 EAST RIDGEWOOD AVE
ORMOND BEACH, FL 32174

FEI Number: 59-1594876

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAWLS, JR., BENJAMIN H
635 E. RIDGEWOOD AVE.
ORMOND BEACH, FL 32174 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 PD
Name RAWLS JR., BENJAMIN H
Address 635 E. RIDGEWOOD AVE
City-State-Zip: ORMOND BEACH FL 32174

Title VP
Name HARPER, JOE A
Address 155 ALYSSA RD
City-State-Zip: WHITE OAK GA 31568

Title ST
Name RAWLS, CHARLES B
Address 2130 GEROGIA 81
City-State-Zip: LOGANVILLE GA 30052

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: RAWLS JR. , BENJAMIN H

PRESIDENT

03/19/2014

Electronic Signature of Signing Officer/Director Detail

Date