

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F45714

Entity Name: DAVID J. ANDRIX, D.V.M.,P.A.

Current Principal Place of Business:

DAVID J ANDRIX, D.V.M., P.A.
20 EAST 13TH STREET
ST CLOUD, FL 34769

Current Mailing Address:

DAVID J ANDRIX, D.V.M., P.A.
20 EAST 13TH STREET
ST CLOUD, FL 34769 US

FEI Number: 59-2137647

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDRIX, DAVID J., D.V.M., P.A.
20 EAST 13TH STREET
ST CLOUD, FL 34769 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	Title	SECRETARY
Name	ANDRIX, DAVID J	Name	MCDONALD, ALIKA RACHELL
Address	20 EAST 13TH STREET	Address	DAVID J ANDRIX, D.V.M., P.A. 20 EAST 13TH STREET
City-State-Zip:	ST CLOUD FL	City-State-Zip:	ST CLOUD FL 34769

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: DAVID J ANDRIX

PRESIDENT

01/03/2025

Electronic Signature of Signing Officer/Director Detail

Date