

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000154713

**Entity Name:** LARGE ANIMAL VETERINARIAN SERVICES OF CENTRAL FLORIDA, P.A.

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC1121393606**

**Current Principal Place of Business:**

1265 PALM DR.  
OVIEDO, FL 32765

**Current Mailing Address:**

5703 RED BUG LAKE ROAD  
BOX 317  
WINTER SPRINGS, FL 32708

**FEI Number: 77-0620209**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PRIVETTE, WILLIAM ALLEN D.V.M.  
1265 PALM DR.  
OVIEDO, FL 32765 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 DR  
Name PRIVETTE, WILLIAM A  
Address 1265 PALM DR.  
City-State-Zip: OVIEDO FL 32765

*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: WILLIAM A PRIVETTE**

**DVM**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date