

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146201

Entity Name: AVS EQUINE MEDICAL & SURGICAL HOSPITAL, P.A.

Current Principal Place of Business:

9085 MAGNOLIA HILL DRIVE
TALLAHASSEE, FL 32309

Current Mailing Address:

9085 MAGNOLIA HILL DRIVE
TALLAHASSEE, FL 32309

FEI Number: 74-3132527

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FISCH, STEPHEN D
9085 MAGNOLIA HILL DR.
TALLAHASSEE, FL 32309 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 DP
Name FISCH, STEPHEN D
Address 9085 MAGNOLIA HILL DRIVE
City-State-Zip: TALLAHASSEE FL 32309

Title CFO
Name FISCH, WILLIAM H
Address 3413 WESTGROVE
City-State-Zip: TALLAHASSEE FL 32312

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: STEPHEN D. FISCH, DVM

DP

04/14/2014

Electronic Signature of Signing Officer/Director Detail

Date