

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000002406

**FILED**  
**Jan 09, 2014**  
**Secretary of State**  
**CC9953260936**

**Entity Name:** BARRON'S VETERINARY SERVICES, INC

**Current Principal Place of Business:**

9030 W FORT ISLAND TRAIL  
UNIT 3  
CRYSTAL RIVER, FL 34429

**Current Mailing Address:**

9030 W FORT ISLAND TRAIL  
UNIT 3  
CRYSTAL RIVER, FL 34429

**FEI Number:** 20-8177267

**Certificate of Status Desired:** No

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

BARRON, TAMERA JDVM  
9030 W FORT ISLAND TRAIL  
#3  
CRYSTAL RIVER, FL 34429 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           DPS  
Name           BARRON, TAMERA J  
Address        9030 W FORT ISLAND TRAIL  
City-State-Zip: CRYSTAL RIVER FL 34429

Title           VT  
Name           BARRON, TAMERA J  
Address        9030 W FORT ISLAND TRAIL  
City-State-Zip: CRYSTAL RIVER FL 34429

*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:** TAMERA BARRON

**PRES**

**01/09/2014**

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

\_\_\_\_\_  
Date