

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000066830

**Entity Name:** MARGARET NEWMAN-BIGGS, DVM, P.A.

**FILED**  
**Jan 12, 2016**  
**Secretary of State**  
**CC4536261698**

**Current Principal Place of Business:**

12798 W FOREST HILL BLVD  
STE 103  
WEST PALM BEACH, FL 33414

**Current Mailing Address:**

12798 W FOREST HILL BLVD  
STE 103  
WEST PALM BEACH, FL 33414

**FEI Number: 65-0515047**

**Certificate of Status Desired: No**

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

NEWMAN-BIGGS, MARGARET  
12798 W FOREST HILL BLVD  
SUITE 103  
WEST PALM BEACH, FL 33414 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           DVM  
Name           NEWMAN-BIGGS, MARGARET  
Address        4547 HUNTING TRAIL  
City-State-Zip: LAKE WORTH FL 33467

Title           DR.  
Name           NEWMAN-BIGGS, MARGARET  
Address        4547 HUNTING TRAIL  
City-State-Zip: LAKE WORTH FL 33467

*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: MARGARET NEWMAN-BIGGS**

**PRESIDENT**

**01/12/2016**

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

\_\_\_\_\_  
Date