

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000230768

Entity Name: NORTH FLORIDA VETERINARY DENTISTRY AND ORAL SURGERY, PLLC

Current Principal Place of Business:

920 KINGSLEY AVE
ORANGE PARK, FL 32073

Current Mailing Address:

920 KINGSLEY AVE
ORANGE PARK, FL 32073 US

FEI Number: 85-2469895

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HOLLOWAY, STEPHANIE R
920 KINGSLEY AVE
ORANGE PARK, FL 32073 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

Authorized Person(s) Detail :

Title	MGR	Title	AUTHORIZED MEMBER
Name	HOLLOWAY, STEPHANIE R	Name	HOLLOWAY, TIMOTHY J
Address	304 CORPORATE WAY	Address	920 KINGSLEY AVE
City-State-Zip:	ORANGE PARK FL 32073	City-State-Zip:	ORANGE PARK FL 32073

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIMOTHY HOLLOWAY

AUTHORIZED MEMBER

03/12/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date