2002 UNIFORM BUSINESS REPORT (UBR)

Sep 03, 2002 8:00 am Secretary of State DOCUMENT # F01000003557 1. Entity Name 09-03-2002 90182 014 ***558.75 WEBSTER VETERINARY SUPPLY, INC. Principal Place of Business Mailing Address 1031 MENDOTA HEIGHTS ROAD 1031 MENDOTA HEIGHTS ROAD ST. PAUL MN 55120 ST. PAUL MN 55120 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 41-2008897 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CD ☐ Delete TITLE ☐ Addition NAME FRECHETTE, PETER L NAME STREET ADDRESS 1031 MENDOTA HEIGHTS ROAD STREET ADDRESS CITY-ST-ZIP ST. PAUL MN 55120 CITY-ST-ZIP TITLE **VTD** ☐ Delete TITLE ☐ Change Addition NAME ARMSTRONG, R. STEPHEN STREET ADDRESS 1031 MENDOTA HEIGHTS ROAD STREET ADDRESS CITY-ST-ZIP ST. PAUL MN 55120 CITY-ST-ZIP TITLE ☐ Delete PC00 ☐ Change Addition NAME WEBSTER, JEFFREY H NAME STREET ADDRESS **86 LEOMINSTER ROAD** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STERLING MA 01564 TITLE ☐ Delete TITLE ☐ Change Addition NAME LEVITT, MATTHEW L STREET ADDRESS 1031 MENDOTA HEIGHTS ROAD STREET ADDRESS CITY-ST-ZIP ST. PAUL MN 55120 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiper or trustee empowered to present this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

CR2E034 (4/02)