

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07260

FILED
Jan 04, 2012
Secretary of State

Entity Name: ANIMAL HOSPITAL OF TAMPA, INC.

Current Principal Place of Business:

C/O KERMIT R HARVEY
4005 W HILLSBOROUGH AVE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

C/O KERMIT R HARVEY
4005 W HILLSBOROUGH AVE
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-2036159

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY, KERMIT R
4005 W HILLSBOROUGH AVE
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP
Name: HARVEY, KERMIT R
Address: 4005 W HILLSBOROUGH AVE
City-St-Zip: TAMPA FL,

Title: D
Name: HARVEY, KRISTOPHER R
Address: 4005 W. HILLSBOROUGH AVE.
City-St-Zip: TAMPA, FL 33614 US

Title: D
Name: HARVEY, KOURTNEY R
Address: 7302 PARK DR
City-St-Zip: TAMPA, FL 33610 US

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: KERMIT R HARVEY

PRES

01/04/2012

Electronic Signature of Signing Officer or Director

Date