

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G77924

FILED
Mar 22, 2011
Secretary of State

Entity Name: COURTENAY ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

C/O GUY MAXWELL DVM
2265 N. COURTENAY PKWY.
MERRITT ISLAND, FL 32953 US

New Principal Place of Business:

Current Mailing Address:

C/O GUY MAXWELL DVM
2265 N. COURTENAY PKWY.
MERRITT ISLAND, FL 32953 US

New Mailing Address:

FEI Number: 59-2475031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CATTERTON, A V JR
1990 W NEW HAVEN AVE
STE 104
MELBOURNE, FL 32904 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: PSD
Name: MAXWELL, GUY R.
Address: 4615 COQUINA RIDGE DR.
City-St-Zip: MELBOURNE, FL 32935 US

Title: VPT
Name: MAXWELL, DEBORAH E.
Address: 4615 COQUINA RIDGE DR.
City-St-Zip: MELBOURNE, FL 32935 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: DEBORAH E. MAXWELL

VPT

03/22/2011

Electronic Signature of Signing Officer or Director

Date