

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002187

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** DR. MUSGRAVE'S ACUPET VETERINARY SERVICES, P.L.

**Current Principal Place of Business:**

8950 STATE ROAD 52  
HUDSON, FL 34667

**New Principal Place of Business:**

**Current Mailing Address:**

8950 STATE ROAD 52  
HUDSON, FL 34667

**New Mailing Address:**

**FEI Number:** 95-4894148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUSGRAVE, JACK L  
8950 STATE ROAD 52  
HUDSON, FL 34667 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MUSGRAVE, JACK L  
Address: 8950 S.R. 52  
City-St-Zip: HUDSON, FL 34667

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JACK L. MUSGRAVE

MEMB

01/05/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date