2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

DOCUMENT# P00000057732

Entity Name: 4 PAWS PET CLINIC, INC.

Current Principal Place of Business:

850694 U. S. HWY. 17
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

850694 U. S. HWY. 17
YULEE, FL 32097

New Mailing Address:

FEI Number: 59-3655663 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORSTRUD, TERRY
1567 PHILIPS MANOR RD.
FERNANDINA BEACH, FL 32034 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: D
Name: NORSTRUD, SHEILA
Address: 96434 CHESTER ROAD
City-St-Zip: YULEE, FL 32097

Title: D
Name: NORSTRUD, TERRY
Address: 1567 PHILIPS MANOR RD.
City-St-Zip: FERNANDINA BEACH, FL 32034

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: SHEILA NORSTRUD PRES 04/20/2011

Electronic Signature of Signing Officer or Director Date