

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000069703

FILED
Jan 07, 2011
Secretary of State

Entity Name: JONESVILLE ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

14145 W. NEWBERRY RD
STE 102
NEWBERRY, FL 32669

New Principal Place of Business:

Current Mailing Address:

14145 W. NEWBERRY RD
STE 102
NEWBERRY, FL 32669

New Mailing Address:

FEI Number: 20-0067060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LERMAN, JILL
14145 W. NEWBERRY RD
STE 102
NEWBERRY, FL 32669 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: DR
Name: LERMAN, JILL
Address: 3454 SW 103 RD ST
City-St-Zip: GAINESVILLE, FL 32608

Title: DR
Name: VLIET, KATHLEEN
Address: 16911 NW 129TH TERRACE
City-St-Zip: ALACHUA, FL 32615

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: JILL LERMAN

PRES

01/07/2011

Electronic Signature of Signing Officer or Director

Date