

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V61516

FILED  
Feb 18, 2011  
Secretary of State

**Entity Name:** ARK ANIMAL HOSPITAL, P.A.

**Current Principal Place of Business:**

3648 BERRYHILL ROAD  
PACE, FL 32571 US

**New Principal Place of Business:**

**Current Mailing Address:**

3648 BERRYHILL ROAD  
PACE, FL 32571 US

**New Mailing Address:**

FEI Number: 59-3147150

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SUMMERLIN, C. DAVID  
6898 MARTIN RD  
MILTON, FL 32570 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: SUMMERLIN, C DAVID  
Address: 6898 MARTIN RD  
City-St-Zip: MILTON, FL 32570

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: C DAVID SUMMERLIN

D

02/18/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date