

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000012200

Entity Name: ST. FRANCIS PET CARE, INC.

Current Principal Place of Business:

501 NE 2ND STREET
GAINESVILLE, FL 32601

Current Mailing Address:

PO BOX 358462
GAINESVILLE, FL 32635-8462

FEI Number: 27-1590456

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KAPLAN-STEIN, DALE DR DVM
229 NW 75TH ST
GAINESVILLE, FL 32760 US

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

Officer/Director Detail :

Title DP
Name KAPLAN-STEIN, DALE DR DVM
Address 229 NW 75TH ST
City-State-Zip: GAINESVILLE FL 32607

Title DV
Name MACHEN, CHRIS
Address 2233 NW 8TH AVE
City-State-Zip: GAINESVILLE FL 62603

Title ST
Name CAPLAN, PRISCILLA
Address 14323 SW 91ST ST.
City-State-Zip: ARCHER FL 32618

Title D
Name NICOLETTI, PAUL
Address 2552 SW 14TH DR.
City-State-Zip: GAINESVILLE FL 32608

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PRISCILLA CAPLAN

SECRETARY/TREASURER 01/19/2014

Electronic Signature of Signing Officer/Director Detail

Date