

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000088555

Entity Name: TIMBERLANE PET HOSPITAL & RESORT, INC.

Current Principal Place of Business:

1704 WALDEN VILLAGE CT.
PLANT CITY, FL 33566

Current Mailing Address:

1704 WALDEN VILLAGE CT.
PLANT CITY, FL 33566

FEI Number: 20-3087516

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAYTON, CHRISTINA R DVM
1704 WALDEN VILLAGE CT.
PLANT CITY, FL 33566 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: CHRISTINA R. LAYTON

01/20/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DR
Name LAYTON, CHRISTINA R
Address 4719 CITRUS HAVEN PLACE
City-State-Zip: PLANT CITY FL 33567

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: CHRISTINA ROBIN LAYTON, DVM

PRESIDENT

01/20/2018

Electronic Signature of Signing Officer/Director Detail

Date