#### 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000069940

Entity Name: ARK ANIMAL HOSPITAL OF POLK COUNTY, INC.

FILED
Apr 29, 2014
Secretary of State
CC4046196266

## **Current Principal Place of Business:**

4648 E. HIGHWAY 540A LAKELAND, FL 33813

# **Current Mailing Address:**

4648 E. HIGHWAY 540A LAKELAND, FL 33813 US

FEI Number: 27-3337444 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MCDANIEL, MARY A 597 THORNBURG ROAD BABSON PARK, FL 33827 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 P Title VP

NameMCDANIEL, MARY ANameFRANKS, TIMOTHY JAddress597 THORNBURG ROADAddress919 SUGAR PLACECity-State-Zip:BABSON PARK FL 33827City-State-Zip:LAKELAND FL 33801

Title S Title T

NameMCDANIEL, MARY ANameMCDANIEL, MARY AAddress597 THORNBURG ROADAddress597 THORNBURG ROADCity-State-Zip:BABSON PARK FL 33827City-State-Zip:BABSON PARK FL 33827

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: TIMOTHY J. FRANKS