

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000059204

Entity Name: ANIMAL HOSPITAL OF PENSACOLA, INC.

Current Principal Place of Business:

5001 N 12 AVE
PENSACOLA, FL 32504

Current Mailing Address:

5001 N 12 AVE
PENSACOLA, FL 32504 US

FEI Number: 59-3262702

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HESS, BRIAN D
9108 FRONT BEACH RD
PANAMA CITY BEACH, FL 32408 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 D
Name CARLOS, THOMAS E
Address 5001 N 12 AVE
City-State-Zip: PENSACOLA FL 32504

Title SECRETARY
Name HILL, DEBBIE K
Address 5001 N 12 AVE
City-State-Zip: PENSACOLA FL 32504

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: DEBBIE K HILL

SECRETARY

04/04/2017

Electronic Signature of Signing Officer/Director Detail

Date