

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000068160

Entity Name: TIMOTHY J. PORTER, P.A.

Current Principal Place of Business:

ANIMAL CARE CENTER
354 SHOPPING CENTER DR
WILDWOOD, FL 34785

Current Mailing Address:

ANIMAL CARE CENTER
354 SHOPPING CENTER DR
WILDWOOD, FL 34785

FEI Number: 59-3526095

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OXFORD-PORTER, ALISON
4516 CR 118
WILDWOOD, FL 34785 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 PA
Name PORTER, TIMOTHY J
Address 4516 CR 118
City-State-Zip: WILDWOOD FL 34785

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 PORTER

PA

04/07/2014

Electronic Signature of Signing Officer/Director Detail

Date