

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000015751

Entity Name: PET CARE HOSPITAL, INC.

Current Principal Place of Business:

5001 N. 12TH AVE.
PENSACOLA, FL 32504

Current Mailing Address:

5001 N. 12TH AVE.
PENSACOLA, FL 32504 US

FEI Number: 59-3564350

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HESS, BRIAN D
9108 FRONT BEACH RD.
PANAMA CITY BEACH, FL 32407 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	DR	Title	VP, SECRETARY, TREASURER
Name	CARLOS, THOMAS E	Name	HILL, DEBBIE K
Address	5001 N. 12TH AVE.	Address	5001 N 12TH AVENUE
City-State-Zip:	PENSACOLA FL 32504	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