

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000148456

**Entity Name:** PET PARADISE-ST. AUGUSTINE, LLC

**Current Principal Place of Business:**

5130 UNIVERSITY BLVD WEST  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

5130 UNIVERSITY BLVD WEST  
JACKSONVILLE, FL 32216

**FEI Number:** 47-4978999

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

JOEL, WILLIAM L ESQ  
5130 UNIVERSITY BLVD WEST  
JACKSONVILLE, FL 32216 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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           AMERICAN PET RESORT, LLC  
Address        5130 UNIVERSITY BLVD WEST  
City-State-Zip: JACKSONVILLE FL 32216

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAM L. JOEL

**SENIOR VICE PRESIDENT   02/03/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date