2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004828

Entity Name: PETLAND, INC.

Current Principal Place of Business:

250 RIVERSIDE STREET CHILLICOTHE, OH 45601

Current Mailing Address:

250 RIVERSIDE STREET CHILLICOTHE, OH 45601

FEI Number: 31-0733680

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Title	CHRM	Title	ASST
Name	KUNZELMAN, EDWARD R	Name	CLARKE, JOSEPH
Address	250 RIVERSIDE STREET	Address	250 RIVERSIDE STREET
City-State-Zip:	CHILLICOTHE OH 45601	City-State-Zip:	CHILLICOTHE OH 45601
Title	PRES, CEO	Title	SEC
Name	WATSON, JOE	Name	KUNZELMAN, ELIZABETH
Address	250 RIVERSIDE STREET	Address	250 RIVERSIDE STREET
City-State-Zip:	CHILLICOTHE OH 45601	City-State-Zip:	CHILLICOTHE OH 45601
Title	TREASURER, VP, CFO	Title	VP OF OPERATIONS
Title Name	TREASURER, VP, CFO JOHNSON, LISA	Title Name	VP OF OPERATIONS HUGGINS, STEVE
Name	JOHNSON, LISA 250 RIVERSIDE STREET	Name	HUGGINS, STEVE
Name Address City-State-Zip:	JOHNSON, LISA 250 RIVERSIDE STREET CHILLICOTHE OH 45601	Name Address	HUGGINS, STEVE 250 RIVERSIDE STREET
Name Address City-State-Zip: Title	JOHNSON, LISA 250 RIVERSIDE STREET CHILLICOTHE OH 45601 VP	Name Address City-State-Zip:	HUGGINS, STEVE 250 RIVERSIDE STREET CHILLICOTHE OH 45601
Name Address City-State-Zip: Title Name	JOHNSON, LISA 250 RIVERSIDE STREET CHILLICOTHE OH 45601 VP BILLUPS, RICK	Name Address City-State-Zip: Title	HUGGINS, STEVE 250 RIVERSIDE STREET CHILLICOTHE OH 45601 VP
Name Address City-State-Zip: Title	JOHNSON, LISA 250 RIVERSIDE STREET CHILLICOTHE OH 45601 VP BILLUPS, RICK 250 RIVERSIDE STREET	Name Address City-State-Zip: Title Name	HUGGINS, STEVE 250 RIVERSIDE STREET CHILLICOTHE OH 45601 VP WINSLOW, BRIAN 250 RIVERSIDE STREET

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: LISA JOHNSON

CFO

04/07/2021

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 07, 2021 Secretary of State 5135160644CC

Date