

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91160 018 ***150.00

DOCUMENT # F01000001542

1. Entity Name

Animal Health Supplies, Inc.

DO NOT WRITE IN THIS SPACE

90130083

2. Principal Place of Business
6551 Broadway Ave.

Suite, Apt. #, etc.

3. Mailing Address
1880 Country Farm Dr.

Suite, Apt. #, etc.

City & State
Jacksonville, FL

City & State
Naperville, IL

4. FEI Number
(37-1406284)

Applied For
Not Applicable

Zip Country
32205 USA

Zip Country
60563 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays St.

City Tallahassee FL Zip Code 32301

DO NOT WRITE IN THIS SPACE

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	See attached list	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10-00-000-20390 (cc: Rick Eide)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or on an attachment with an address with another like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secy. & Treas.

4/9/03

Date

630-548-8210

Daytime Phone #

CR2E034B (12/01)

Attachment

90130083

FO100001542

**ANIMAL HEALTH SUPPLIES, INC.
DIRECTORS AND OFFICERS**

Name	Title	Address
Dirk Hejnal	Director and Chairman	1880 Country Farm Dr. Naperville, IL 60563
Vern Foster	Director and President	6551 Broadway Ave. Jacksonville, FL 32205
Ray McCurdy	Director, Secretary and Treasurer	1880 Country Farm Dr. Naperville, IL 60563
Robert H. Bard	Director	6551 Broadway Ave. Jacksonville, FL 32205
Dennis Dynneson	Director, Vice President and General Manager	6551 Broadway Ave. Jacksonville, FL 32205