

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F03783

FILED
Jun 12, 2008
Secretary of State

Entity Name: JULINGTON CREEK ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

12075 SAN JOSE BLVD.
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

Current Mailing Address:

12075 SAN JOSE BLVD.
JACKSONVILLE, FL 32223 US

New Mailing Address:

FEI Number: 59-2034887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALSEMA, JAY C
208 N. LAURA ST.
#900
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WINCHESTER, ERIC R DR.
Address: 12075 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: VP () Delete
Name: WINCHESTER JR., ERIC R DR.
Address: 12075 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: WINCHESTER, JANIS C MRS.
Address: 12075 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: AS () Change (X) Addition
Name: WINCHESTER, SHAWN M MRS.
Address: 12075 SAN JOSE BLVD.
City-St-Zip: JACKSONVILLE, FL 32223 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANIS C. WINCHESTER

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06/12/2008

Electronic Signature of Signing Officer or Director

Date