2001 UNIFORM BUSINESS REPORT (UBR)

May 23, 2001 8:00 am Secretary of State **DOCUMENT #** F93000005029 05-23-2001 91156 004 ***150.00 1. Entity Name VCA HOWELL BRANCH ANIMAL HOSPITAL, Principal Place of Business Mailing Address 12401 W. CLYMPIC BLVD. 1401 HOWELL BRANCH RD WINTER PARK, FL 32789 LOS ANGELES, CA 90064 D0056047 2. Principal Place of Business 3. Mailing Address 1401 HOWELL BRANCH RD 12401 W. CLYMPIC BLVD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For LOS ANGELES, WINTER PARK 95-4445010 FT. Not Applicable Country **Zip** 32789 Country \$8.75 Additional 5. Certificate of Status Desired 90064-1022 USA USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code City 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 FILE NOV/!!! FEE IS \$150,00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$650.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. PRES/CEO/DIR TITLE Delete TITLE NAME NAME ROBERT L. ANTIN STREET ADDRESS STREET ADDRESS 12401 W. OLYMPIC BLVD. CITY - ST - ZIP CITY - ST - ZIP LOS_ANGELES, CA 90064-1022 Addition TITLE VP/DIR Delete TITLE Change NEIL TAUBER NAME NAME STREET ADDRESS STREET ADDRESS 12401 W. OLYMPIC BLVD. CITY - ST - ZIP CITY - ST - ZIF ANGELES, CA 90064-1022 Addition TITLE Delete SEC/DIR NAME NAME ARTHUR J. ANTIN 12401 W. OLYMPIC BLVD. LOS ANGELES, CA 90064-STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP CA 90064-1022 Change Addition TREASURER/CFO TITLE TITLE Delete NAME NAME TOMAS W. FULLER STREET ADDRESS STREET ADDRESS 12401 W. OLYMPIC BLVD. CITY - ST - ZIP CITY - ST - ZIP LOS ANGELES, CA 90064-1022 Addition TITLE TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP 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 a supplemental report is true and acc irate and that my signature shall have the same legal effect as if made under oath; that I am an

he receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

(310)584-6500

Daytime Phone #

achment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TOMAS W.

FILED

STE FL32381E 1

officer or director of the

in Block 11 or Block 12

SIGNATURE:

corparati