

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000001531

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** TRI-ANIM HEALTH SERVICES, INC.

**Current Principal Place of Business:**

13170 TELFAIR AVE.  
SYLMAR, CA 91342

**New Principal Place of Business:**

**Current Mailing Address:**

13170 TELFAIR AVE.  
SYLMAR, CA 91342

**New Mailing Address:**

**FEI Number:** 95-2959155

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST.  
SUITE 105  
TALLAHASSEE, FL 32301 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** CEO  
**Name:** STRUIK, HANK  
**Address:** 13170 TELFAIR AVE.  
**City-St-Zip:** SYLMAR, CA 91342

**Title:** CFO  
**Name:** DOUGHERTY, MARK  
**Address:** 13170 TELFAIR AVE.  
**City-St-Zip:** SYLMAR, CA 91342

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:** DAN PISTER

VP

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date