

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H36932

FILED
Feb 18, 2010
Secretary of State

Entity Name: FOREST CITY SMALL ANIMAL CLINIC, INC.

Current Principal Place of Business:

% LAWRENCE E. BLUM
110 JEWEL DRIVE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

110 JEWEL DRIVE
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

% LAWRENCE E. BLUM
2702 MAXWELL DRIVE
APOPKA, FL 32703

New Mailing Address:

110 JEWEL DRIVE
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-2474810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLUM, LAWRENCE E.
110 JEWEL DRIVE
APOPKA, FL 32714 US

Name and Address of New Registered Agent:

DENNIS, M.J.
430 E. PACKWOOD AVE.
APT. B208
MAITLAND, FL 32751 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: M.J. DENNIS

02/18/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP
Name: BLUM, LAWRENCE J.
Address: 5 DODGE AVE.
City-St-Zip: GEORGETOWN, MA 01833

Title: P
Name: DENNIS, M J
Address: 430 E. PACKWOOD AVE. APT. B208
City-St-Zip: MAITLAND, FL 32751

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: M.J. DENNIS

P

02/18/2010

Electronic Signature of Signing Officer or Director

Date