

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 15, 2005 8:00 am
Secretary of State

03-15-2005 90351 018 ****50.00

DOCUMENT # L01000010898

1. Entity Name

ESTERO ANIMAL HOSPITAL, PROFESSIONAL LIMITED
LIABILITY COMPANY



Principal Place of Business
22088 S TAMiami TRAIL
SUITE #2
ESTERO FL 33928

Mailing Address
22088 S TAMiami TRAIL
SUITE #2
ESTERO FL 33928

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E083 (10/04)

4. FEI Number 65-1110712

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

TESCHKE, KIRK
8500 MOCKINGBIRD LANE
ESTERO FL 33928

7. Name and Address of New Registered Agent

Name TESCHKE, KIRK

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

22088 S. TAMiami TR SUITE #2

City ESTERO

FL

Zip Code 33928

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME SCRABIS, LARRY
STREET ADDRESS 6043 SWORDS WAY
CITY-ST-ZIP FORT MYERS FL 33908

TITLE MGRM ☐ Delete
NAME TESCHKE, KIRK
STREET ADDRESS 8500 MOCKINGBIRD LANE
CITY-ST-ZIP ESTERO FL 33928

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM ☒ Change ☐ Addition
NAME SCRABIS, LARRY
STREET ADDRESS 1343 CANTERBURY DR
CITY-ST-ZIP FORT MYERS, FL 33901

TITLE MGRM ☒ Change ☐ Addition
NAME Teschke, Kirk
STREET ADDRESS 21810 Sunset Lake Ct
CITY-ST-ZIP Estero, FL 33928

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Kirk Teschke 1/24/05 239-992-3883
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #