

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016215

FILED
Jun 30, 2005
Secretary of State

Entity Name: OCALA VETERINARY HOSPITAL, P.L.

Current Principal Place of Business:

1279 E SILVER SPRINGS BLVD
OCALA, FL 344706878

New Principal Place of Business:

Current Mailing Address:

1279 E SILVER SPRINGS BLVD
OCALA, FL 344706878

New Mailing Address:

FEI Number: 59-3742965 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BEHNKE, JANET W
500 NE 8TH AVE
OCALA, FL 344705345 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OSBORNE, DION L DVM
Address: 1279 E. SILVER SPRINGS BLVD
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: DION L OSBORNE

MGRM

06/30/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date