2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Sep 10, 2008
Secretary of State

DOCUMENT# L02000003437

Entity Name: VETMEDTEAM, LLC

Current Principal Place of Business:

7785 OAKHURST ROAD
SEMINOLE, FL 33776

New Principal Place of Business:

Current Mailing Address:

7785 OAKHURST ROAD
SEMINOLE, FL 33776

New Mailing Address:

FEI Number: 59-3601580 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHULER, TIMOTHY C
9075 SEMINOLE BLVD.
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

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: TOLLON, DAVID C
Address: 7785 OAKHURST ROAD
City-St-Zip: SEMINOLE, FL 33776

Title: MGRM (X) Delete
Name: SCHUBERT, CAROL
Address: 7785 OAKHURST ROAD
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TIMOTHY C. SCHULER RA 09/10/2008

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