2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000015104

1. Entity Name
ANIMAL ER OF UNIVERSITY PARK, L.L.C.

Principal Place of Business	Mailing Address
8239 COOPER CREEK BLVD BRADENTON, FL 34201	8239 COOPER CREEK BLVD BRADENTON, FL 34201

04062005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0463832
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NAGLE, TERESA A
132 RUTGERS ROAD
VENICE, FL 34293

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	NAGLE, TERESA A
STREET ADDRESS	132 RUTGERS ROAD
CITY-ST-ZIP	VENICE, FL 34293
TITLE	MGRM
NAME	MUELLER, MELISSA W
STREET ADDRESS	7717 SADDLE CREEK TRAIL
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	MGRM
NAME	HOLIFIELD, DAVID G
STREET ADDRESS	PO BOX 20368
CITY-ST-ZIP	BRADENTON, FL 34204
TITLE	MGRM
NAME	MCGINNIS, PAMELA M
STREET ADDRESS	13651 HIGHLAND RD
CITY-ST-ZIP	PARRISH, FL 34219
TITLE	MGRM
NAME	CORONA, GILBERTO
STREET ADDRESS	5627 29TH ST E
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	MGRM
NAME	EGAN, HEATHER
STREET ADDRESS	7616 2ND AVE W.
CITY-ST-ZIP	BRADENTON, FL 34209

U00000296502
04/09/05-80068-018 50.00

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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: Teresa A Nagle 4-7-05 941-493-9587
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #