

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028437

FILED
Apr 29, 2008
Secretary of State

Entity Name: MOBILE ANIMAL SURGICAL HOSPITAL, LLC

Current Principal Place of Business:

3520-3 AVALON PARK BLVD E
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

3520-3 AVALON PARK BLVD. E
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 20-0350049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGTON, SCOTT J
15316 PERDIDO
ORLANDO, FL 32828 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: MGR () Delete
Name: LANGTON, SCOTT J DVM
Address: 15316 PERDIDO
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LANGTON, SCOTT J DVM
Address: 3520 AVALON PARK BLVD E
City-St-Zip: ORLANDO, FL 32828

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: SCOTT LANGTON

MGR

04/29/2008

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