

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044308

FILED
Jan 29, 2011
Secretary of State

Entity Name: POLK COUNTY ANIMAL HOSPITAL, PL

Current Principal Place of Business:

7433 U.S. HWY. 98 NORTH
LAKELAND, FL 33809 US

New Principal Place of Business:

Current Mailing Address:

7433 U.S. HWY. 98 NORTH
LAKELAND, FL 33809 US

New Mailing Address:

FEI Number: 20-0519547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOROWITZ, STEPHEN A
7433 U.S. HWY. 98 NORTH
LAKELAND, FL 33809 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
Name: HOWELL, KECIA DVM
Address: 7433 U.S. HWY. 98 NORTH
City-St-Zip: LAKELAND, FL 33809 US

I hereby 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: KECIA HOWELL, DVM

MGRM

01/29/2011

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