

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000090777

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** JACKSONVILLE VETERINARY ER, PL

**Current Principal Place of Business:**

3444 SOUTHSIDE BLVD.  
SUITE 101  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

3444 SOUTHSIDE BLVD.  
SUITE 103  
JACKSONVILLE, FL 32216

**New Mailing Address:**

**FEI Number:** 20-2010300

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCNICHOLAS, WALTER T JR  
3444 SOUTHSIDE BLVD  
103  
JACKSONVILLE, FL 32216 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  
Name: MCNICHOLAS, WALTER T JR  
Address: 3444 SOUTHSIDE BLVD., SUITE 103  
City-St-Zip: JACKSONVILLE, FL 32216

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: WALTER T. MCNICHOLAS, JR., DVM

MR.

01/07/2010

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