

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010265

Entity Name: ALPHA PET CARE LLC

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

1715 HODGES BLVD #2705
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

P O BOX 330542
ATLANTIC BEACH, FL 32233

New Mailing Address:

FEI Number: 75-3211791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASEY, MELISSA
257 PEREGRINE CT
JACKSONVILLE, FL 32225 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: ROBERTS, JALLYN R
Address: 1715 HODGES BLVD #2705
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ROBERTS, JACLYN E
Address: 1715 HODGES BLVD #2705
City-St-Zip: JACKSONVILLE, FL 32224

I hereby certify that the information supplied with this filing does not qualify for the 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: JACLYN E ROBERTS

MGR

04/27/2006

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