

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000038564

FILED
Apr 10, 2012
Secretary of State

Entity Name: TWIN OAKS EQUINE VETERINARY CLINIC, LLC

Current Principal Place of Business:

12717 NW 39 AVE
GAINESVILLE, FL 32606

New Principal Place of Business:

12717 NW 39 AVE
GAINESVILLE, FL 32606 US

Current Mailing Address:

12717 NW 39 AVE
GAINESVILLE, FL 32606

New Mailing Address:

12717 NW 39 AVE
GAINESVILLE, FL 32606 US

FEI Number: 30-0688661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMMONS, RANDALL C DVM
12717 NW 39 AVE
GAINESVILLE, FL 32606 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: EMMONS, RANDALL C DVM
Address: 12717 NW 39 AVE
City-St-Zip: GAINESVILLE, FL 32606 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: RANDALL C EMMONS

MGRM

04/10/2012

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