

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083166

FILED
Jan 22, 2009
Secretary of State

Entity Name: SUNSHINE STATE VETERINARY SPECIALISTS, P.L.

Current Principal Place of Business:

3444 SOUTHSIDE BLVD.
SUITE 101
JACKSONVILLE, FL 32216

New Principal Place of Business:

3444 SOUTHSIDE BLVD.
SUITE 102
JACKSONVILLE, FL 32216

Current Mailing Address:

3444 SOUTHSIDE BLVD.
SUITE 101
JACKSONVILLE, FL 32216

New Mailing Address:

3444 SOUTHSIDE BLVD.
SUITE 102
JACKSONVILLE, FL 32216

FEI Number: 26-3568805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OWENS, JOHN E
220 ST JOHNS AVENUE
PALATKA, FL 32178 US

Name and Address of New Registered Agent:

NORTH FLORIDA VETERINARY SPECIALISTS, P.A.
3444 SOUTHSIDE BLVD.
SUITE 102
JACKSONVILLE, FL 32216 US

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: MITCHELL A. CRYSTAL

01/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OWENS, REBECCA J
Address: 3444 SOUTHSIDE BLVD., SUITE 101
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM () Delete
Name: CRYSTAL, MITCHELL A
Address: 3444 SOUTHSIDE BLVD., SUITE 102
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRYSTAL, MITCHELL A
Address: 3444 SOUTHSIDE BLVD., SUITE 102
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM (X) Change () Addition
Name: OWENS, REBECCA J
Address: 3444 SOUTHSIDE BLVD., SUITE 101
City-St-Zip: JACKSONVILLE, FL 32216

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: MITCHELL A. CRYSTAL

MGRM

01/22/2009

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