

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000026531

FILED
Feb 04, 2011
Secretary of State

Entity Name: WHOLESAL VET PRODUCTS, LLC.

Current Principal Place of Business:

40362 US HWY 19 NORTH
SUITE 316
TARPON SPRINGS, FL 34689

New Principal Place of Business:

40351 US HWY 19 NORTH
SUITE 316
TARPON SPRINGS, FL 34689 US

Current Mailing Address:

43695 US HWY 19 NORTH
TARPON SPRINGS, FL 34689

New Mailing Address:

43695 US HWY 19 N
STE 316
TARPON SPRINGS, FL 34689 US

FEI Number: 26-4487891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABBATE, SALVATORE
40362 US HWY 19 NORTH
SUITE 316
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

ABBATE, SALVATORE
40351 US HWY 19 NORTH
SUITE 316
TARPON SPRINGS, FL 34689 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: SALVATORE ABBATE

02/04/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ABBATE, SALVATORE
Address: 40351 US HWY 19 NORTH SUITE 316
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGRM
Name: SHAYNE IRREVOCABLE TRUST
Address: 40351 US HWY 19 NORTH SUITE 316
City-St-Zip: TARPON SPRINGS, FL 34689 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: SALVATORE ABBATE

MGRM

02/04/2011

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