

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000064851

Entity Name: MURBELLA ANIMAL HOSPITAL, LLC

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3625 PACETTI ROAD  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

4496 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32216

**New Mailing Address:**

10175 FORTUNE PARKWAY  
SUITE 601  
JACKSONVILLE, FL 32256

FEI Number: 27-0496833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHER, TOUSEY, LEAS & BALL, P.A.  
501 RIVERSIDE AVENUE, SUITE 600  
JACKSONVILLE, FL 32202 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: MAXWELL, ANNA K  
Address: 420 HEATHER PARK LANE  
City-St-Zip: JACKSONVILLE, FL 32095

Title: MGR  
Name: SUGGS, ALLEN D JR.  
Address: 10175 FORTUNE PARKWAY STE 601  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR  
Name: CULPEPPER, ROBERT A JR.  
Address: 4496 SOUTHSIDE BLVD  
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: ALLEN SUGGS

MGR

04/21/2011

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