

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000032291

FILED
Apr 14, 2011
Secretary of State

Entity Name: BRADFORDVILLE PAWS & CLAWS P.L.

Current Principal Place of Business:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 323096334

New Principal Place of Business:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 323096334 US

Current Mailing Address:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 323096334

New Mailing Address:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 323096334 US

FEI Number: 80-0562770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FIGLIO, ERIK M
123 SOUTH CALHOUN STREET
TALLAHASSEE, FL 323011517 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: MEMB
Name: CRAWFORDVILLE ANIMAL HOSPITAL, INC.
Address: 2807 CRAWFORDVILLE HIGHWAY
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: MEMB
Name: FIGLIO, LILLIAN D
Address: 6463 DOWNHILL ROAD
City-St-Zip: TALLAHASSEE, FL 32311 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: OTFRIED GUHRT

MEMB

04/14/2011

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