

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000032291

FILED
Apr 11, 2012
Secretary of State

Entity Name: BRADFORDVILLE PAWS & CLAWS P.L.

Current Principal Place of Business:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 323096334 US

New Principal Place of Business:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32309 US

Current Mailing Address:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 323096334 US

New Mailing Address:

3819 BRADFORDVILLE ROAD
TALLAHASSEE, FL 32309 US

FEI Number: 80-0562770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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:

FIGLIO, ERIK M
123 SOUTH CALHOUN STREET
TALLAHASSEE, FL 32301 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: ERIK M. FIGLIO

04/11/2012

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: LILLIAN D. FIGLIO

MEMB

04/11/2012

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