

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000107976

FILED
Apr 14, 2011
Secretary of State

Entity Name: EQUINE QUARANTINE OF PALM BEACH, LLC

Current Principal Place of Business:

13125 SOUTHFIELDS RD
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

13125 SOUTHFIELDS RD
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 27-3785398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALM BEACH EQUINE CLINIC, LLC
13125 SOUTHFIELDS RD
WELLINGTON, FL 33414 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: MGRM
Name: SWERDLIN, SCOTT J
Address: 13125 SOUTHFIELDS RD
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGR
Name: BRUSIE, ROBERT W
Address: 13125 SOUTHFIELDS RD
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGR
Name: WOLLENMAN, PAUL
Address: 13125 SOUTHFILEDS RD
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGR
Name: WHEELER, RICHARD G
Address: 13125 SOUTHFIELDS RD
City-St-Zip: WELLINGTON, FL 33414 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: SCOTT J. SWERDLIN

MGRM

04/14/2011

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