

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L40564

FILED
Mar 25, 2012
Secretary of State

Entity Name: LAKE OSBORNE ANIMAL CLINIC, INC.

Current Principal Place of Business:

% JOHN TERIN LYNCH DVM
1502 LAKE OSBORNE DR
LAKE WORTH, FL 33461

New Principal Place of Business:

1502 LAKE OSBORNE DR
LAKE WORTH, FL 33461

Current Mailing Address:

% JOHN TERIN LYNCH DVM
1502 LAKE OSBORNE DR
LAKE WORTH, FL 33461

New Mailing Address:

1502 LAKE OSBORNE DR
LAKE WORTH, FL 33461

FEI Number: 65-0163973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCH, JOHN TERIN
1502 LAKE OSBORNE DR
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

LYNCH, JOHN T DVM
1502 LAKE OSBORNE DR
LAKE WORTH, FL 33461 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: JOHN T. LYNCH DVM

03/25/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: LYNCH, JOHN T DVM
Address: 1502 LAKE OSBORNE DR
City-St-Zip: LAKE WORTH, FL 33461

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN T. LYNCH DVM

D

03/25/2012

Electronic Signature of Signing Officer or Director

Date