

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81864

FILED
May 22, 2009
Secretary of State

Entity Name: LIGHTHOUSE POINT ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

3138 N. FEDERAL HIGHWAY
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

3138 N. FEDERAL HIGHWAY
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

6281 NW 53RD STREET
CORAL SPRINGS, FL 33067 US

FEI Number: 65-0200787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, RICHARD B.
2791 NE 24TH STREET
LIGHTHOUSE POINT, FL 33064 US

Name and Address of New Registered Agent:

TROSCH, MICHAEL
6281 NW 53RD STREET
CORAL SPRINGS, FL 33067 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: MICHAEL TROSCH

05/22/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNTSON, RICHARD B
Address: 2732 NE 21ST TERRACE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TROSCH, MICHAEL
Address: 6281 NW 53RD STREET
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: S () Change (X) Addition
Name: TROSCH, MICHAEL
Address: 6281 NW 53RD STREET
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: VP () Change (X) Addition
Name: JOHNSTON, SUSAN
Address: 2449 SE 8TH CT
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: T () Change (X) Addition
Name: JOHNSTON, SUSAN
Address: 2449 SE 8TH CT
City-St-Zip: POMPANO BEACH, FL 33062 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL TROSCH

P

05/22/2009

Electronic Signature of Signing Officer or Director

Date