## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N05000011359

City-St-Zip: WINTER PARK, FL 32789

FILED Nov 14, 2007 Secretary of State

DOCON	ILIVI# IVU	5000011559		Secretary of State	
Entity Na	me: HIPDOG	CANINE HYDROTHERAPY, II	NC.		
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	METTO AVEN PARK, FL 327				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	YA WOODS E	BLVD.			
233 OVIEDO, FL 32765					
FEI Number: 20-4105443		FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address of	e and Address of New Registered Agent:	
LAW OFFI 5415 LAKE		PHIA E. LANGLEY, P.A. DAD, NO. 242 192 US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: SOPHIA	LANGLEY			
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( LATIMER, KRI 2355 FORRES WINTER PARI	ST ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	NOWICKI, TH	) Delete DMAS GTON, APARTMENT NO. 6	Title: Name: Address:	( ) Change ( ) Addition	

City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA SUMNER MS. 11/14/2007