2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# N06000001637

Entity Name: PET FLORIDA-JAX, INC.

Current Principal Place of Business:

2253 OXBOW ROAD
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

4341 SAVANNAH AVENUE
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 56-2558728 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WOODARD, THOMAS G
4341 SAVANNAH AVENUE
JACKSONVILLE, FL 32210 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

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: DOWNING, CHARLES
Address: 2253 OX BOW ROAD
City-St-Zip: JACKSONVILLE, FL 322102443

Title: PD ( ) Delete
Name: COWEN, DANIEL
Address: 4323 SAVANNAH AVE
City-St-Zip: JACKSONVILLE, FL 322107307

Title: VD ( ) Delete
Name: DANIEL, PAUL
Address: 1132 TALBOT AVE
City-St-Zip: JACKSONVILLE, FL 322055313

Title: D ( ) Delete
Name: WOODARD, THOMAS
Address: 4341 SAVANNAH AVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: S ( ) Delete
Name: WOODARD, MARGARET
Address: 4341 SAVANNAH AVE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: THOMAS G. WOODARD D 01/07/2009
Electronic Signature of Signing Officer or Director — Date