

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000077675

FILED
Apr 30, 2005
Secretary of State

Entity Name: MR. AND MRS. PET OF MARTIN COUNTY INC.

Current Principal Place of Business:

3239 SW MAPP RD
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

3239 SW MAPP RD
PALM CITY, FL 34990

New Mailing Address:

FEI Number: 65-1050552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRINGER, JOHN CHESTER
1303 S E MADISON AVENUE
STUART, FL 34996 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARRINGER, JOHN C
Address: 3239 SW MAPP RD
City-St-Zip: PALM CITY, FL 34990

Title: VP () Delete
Name: DAVIS, DEBORAH
Address: 3239 SW MAPP RD
City-St-Zip: PALM CITY, FL 34990

Title: SEC () Delete
Name: KIRBY, NICHOLE
Address: 3239 SW MAPP ROAD
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CONNELLY, DAWNE
Address: 3239 SW MAPP RD
City-St-Zip: PALM CITY, FL 34990

Title: SEC (X) Change () Addition
Name: DEBBIE, DAVIS
Address: 3239 SW MAPP ROAD
City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN BARRINGER

P

04/30/2005

Electronic Signature of Signing Officer or Director

_____ Date