2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000077675

City-St-Zip:

PALM CITY, FL 34990

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

FILED Apr 03, 2008 Secretary of State

Owner A Daire direct Disease of Description			Nove Being des I Black	New Britains Black of Business	
Current Principal Place of Business:			New Principal Place o	r Business:	
3239 SW I PALM CIT	MAPP RD Y, FL 34990				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
3239 SW I PALM CIT	MAPP RD Y, FL 34990				
FEI Number	: 65-1050552	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	ER, JOHN CH MADISON AVE FL 34996 L				
	named entity : e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BARRINGER, J 3239 SW MAPI PALM CITY, FL	PRD	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () BARRINGER, I 3239 SW MAPI PALM CITY, FL	PRD	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	SEC () MELFI, DEBBIE 3239 SW MAPI		Title: (Name: Address:) Change () Addition	

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.

City-St-Zip:

SIGNATURE: JOHN BARRINGER P 04/03/2008