

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000033851

FILED
Apr 03, 2006
Secretary of State

Entity Name: THE ANIMAL HOSPITAL OF CENTRAL BREVARD, INC.

Current Principal Place of Business:

4521 NORTH WICKHAM ROAD SUITE 102
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

4521 NORTH WICKHAM ROAD SUITE 102
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-3709705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MC CLOUD, KARLA
4521 NORTH WICKHAM ROAD SUITE 102
MELBOURNE, FL 32935 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: D () Delete
Name: MC CLOUD, KARLA
Address: 2820 POMELLO ROAD
City-St-Zip: MALABAR, FL 32950

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: PUGH, CHARLES R
Address: 4521 N WICKHAM RD SUITE 102
City-St-Zip: MELBOURNE, FL 32935

I hereby certify that the information supplied with this filing does not qualify for the 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: KARLA V. MC CLOUD, PRESIDENT

PRES

04/03/2006

Electronic Signature of Signing Officer or Director

Date