

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000099004

FILED
Apr 23, 2011
Secretary of State

Entity Name: WESTCOAST VETERINARY HOSPITAL, P.A.

Current Principal Place of Business:

2306 IMMOKALEE ROAD
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

2306 IMMOKALEE ROAD
NAPLES, FL 34110

New Mailing Address:

FEI Number: 59-3750055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REIFF, LESLI DVM
2306 IMMOKALEE ROAD
NAPLES, FL 34110 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: DPST
Name: REIFF, LESLI DVM
Address: 2214 REGAL WAY
City-St-Zip: NAPLES, FL 34110

I hereby 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 all other like empowered.

SIGNATURE: LESLI R. REIFF

CEO

04/23/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date