

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016690

FILED
May 01, 2004
Secretary of State

Entity Name: ANIMAL HEALTH CENTER OF STUART, INC.

Current Principal Place of Business:

P.O. BOX 3119
STUART, FL 34995

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3119
STUART, FL 34995

New Mailing Address:

FEI Number: 03-0467855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAXTER, GREGGORY
1861 SW GATLIN BLVD.
PORT ST. LUCIE, FL 34953 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: VP () Delete
Name: ADAMS, PETER J VP
Address: P.O. BOX 3119
City-St-Zip: STUART, FL 34995 US

Title: PRES () Delete
Name: BAXTER, GREGGORY J PRESIDE
Address: P.O. BOX 3119
City-St-Zip: STUART, FL 34995 US

Title: SECR () Delete
Name: BAXTER, GREGGORY J SECRETA
Address: P.O. BOX 3119
City-St-Zip: STUART, FL 34995 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BAXTER, GREGGORY J VP
Address: P.O. BOX 3119
City-St-Zip: STUART, FL 34995 US

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 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: GREGGORY J BAXTER

PRES

05/01/2004

Electronic Signature of Signing Officer or Director

_____ Date