2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2012
Secretary of State

DOCUMENT# P02000055694

Entity Name: CROSS CREEK ANIMAL MEDICAL CENTRE, INC.

Current Principal Place of Business:

10323 CROSS CREEK BLVD
SUITE H
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

10323 CROSS CREEK BLVD
SUITE H
TAMPA, FL 33647

New Mailing Address:

FEI Number: 37-1430772 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HODGE, TIMOTHY D
371 CHANNELSIDE WALKWAY, UNIT 1504
TAMPA, FL 33602 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: P
Name: HODGE, TIMOTHY
Address: 371 CHANNELSIDE WALKWAY, UNIT 1504
City-St-Zip: TAMPA, FL 33602

Title: VP
Name: MARTINEZ, EDWIN
Address: 371 CHANNELSIDE WALKWAY, UNIT 1504
City-St-Zip: TAMPA, FL 33602

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: EDWIN MARTINEZ VP 02/18/2012

Electronic Signature of Signing Officer or Director Date