

FILED
May 21, 2004 08:00 AM
Secretary of State

DOCUMENT # P02003061354		Secretary of State	
1. Entity Name A-1 WET PETS OF DELAND, INC.			
Principal Place of Business 1578 N. WOODLAND BLVD. DELAND, FL 32720		Mailing Address 1578 N. WOODLAND BLVD. DELAND, FL 32720	
DO NOT WRITE IN THIS SPACE			
		01062004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 75-3065314	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WRIGHT, PETER W 2588 MORGAN ROAD DELAND, FL 32720		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U000000161186 05/21/04-80004-001 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE	
VP WRIGHT, MICHAEL 2588 MORGAN RD. DELAND, FL 32720			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
ST WRIGHT, TRACY 2588 MORGAN RD. DELAND, FL 32720			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Peter W. Wright</u> PETER W. WRIGHT		4-28-04 386-938-2101	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	