

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013524

FILED
May 01, 2009
Secretary of State

Entity Name: SUNCOAST VETERINARY CARE CENTER, INC.

Current Principal Place of Business:

20319 STATE ROAD 54
LUTZ, FL 33558

New Principal Place of Business:

Current Mailing Address:

20319 STATE ROAD 54
LUTZ, FL 33558

New Mailing Address:

FEI Number: 20-2232323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUBLEY AND BUBLEY, P.A.
3820 NORTHDAL BLVD.
SUITE 312
TAMPA, FL 33624 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SULLIVAN-TAMBOE, DEBORAH L DVM
Address: 20319 STATE ROAD 54
City-St-Zip: LUTZ, FL 33558

Title: D () Delete
Name: DANIELS, JO ANN DVM
Address: 20319 STATE ROAD 54
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DEBORAH L. SULLIVAN-TAMBOE, DVM

D

05/01/2009

Electronic Signature of Signing Officer or Director

Date