

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000022732

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: TRINITY PET HOSPITAL, INC.

## Current Principal Place of Business:

1742 LOCH HAVEN COURT  
TRINITY, FL 34655

## New Principal Place of Business:

7813 MITCHELL BLVD  
SUITE# 112  
TRINITY, FL 34655

## Current Mailing Address:

1742 LOCH HAVEN COURT  
TRINITY, FL 34655

## New Mailing Address:

7813 MITCHELL BLVD  
SUITE #112  
TRINITY, FL 34655

FEI Number: 30-0303754

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STELTER, CHRIS  
1742 LOCH HAVEN COURT  
TRINITY, FL 34655 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: P ( ) Delete  
Name: STELTER, CHRIS  
Address: 1742 LOCH HAVEN COURT  
City-St-Zip: TRINITY, FL 34655

Title: VP ( ) Delete  
Name: LAMB, SCOTT  
Address: 1742 LOCH HAVEN COURT  
City-St-Zip: TRINITY, FL 34655

Title: TRES ( ) Delete  
Name: STELTER, CHRIS  
Address: 1742 LOCH HAVEN COURT  
City-St-Zip: TRINITY, FL 34655

Title: SECY ( ) Delete  
Name: LAMB, SCOTT  
Address: 1742 LOCH HAVEN COURT  
City-St-Zip: TRINITY, FL 34655

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STELTER, KIM  
Address: 7813 MITCHELL BLVD SUITE 112  
City-St-Zip: TRINITY, FL 34655

Title: VP (X) Change ( ) Addition  
Name: STELTER, CHRIS  
Address: 7813 MITCHELL BLVD SUITE 112  
City-St-Zip: TRINITY, FL 34655

Title: TRES (X) Change ( ) Addition  
Name: STELTER, CHRIS  
Address: 7813 MITCHELL BLVD SUITE 112  
City-St-Zip: TRINITY, FL 34655

Title: SECY (X) Change ( ) Addition  
Name: STELTER, KIM  
Address: 7813 MITCHELL BLVD SUITE 112  
City-St-Zip: TRINITY, FL 34655

I hereby certify that the information supplied with this filing does not qualify for the 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: KIM STELTER

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date