

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000053419

Entity Name: VETSMARK, INC.

FILED  
Jul 14, 2008  
Secretary of State

## Current Principal Place of Business:

1420 CELEBRATION BLVD, SUITE 303  
CELEBRATION, FL 34747

## New Principal Place of Business:

THE PALM PLAZA, 1420 CELEBRATION BLVD,  
SUITE 303  
CELEBRATION, FL 34747

## Current Mailing Address:

1420 CELEBRATION BLVD, SUITE 303  
CELEBRATION, FL 34747

## New Mailing Address:

THE PALM PLAZA, 1420 CELEBRATION BLVD,  
SUITE 303  
CELEBRATION, FL 34747

FEI Number: 20-2712478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVENUE SOUTH  
SUITE 101-330  
NAPLES, FL 34102 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: DP ( ) Delete  
Name: ZAKRZESKI, ALEX  
Address: 854 BLUE SAGE STREET, UNIT 303  
City-St-Zip: CELEBRATION, FL 34747

Title: DST ( ) Delete  
Name: RIVERS, LARRY W. SR.  
Address: 854 BLUE SAGE STREET, UNIT 303  
City-St-Zip: CELEBRATION, FL 34747

Title: D ( ) Delete  
Name: RIVERS, JUDY K.  
Address: 854 BLUE SAGE STREET, UNIT 303  
City-St-Zip: CELEBRATION, FL 34747

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LARRY W. RIVERS, SR.

DST

07/14/2008

Electronic Signature of Signing Officer or Director

Date