

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000108216

FILED
Jun 17, 2009
Secretary of State

Entity Name: CATS & DOGS VETERINARIAN CLINIC, INC.

Current Principal Place of Business:

1318 NW FEDERAL HWY.
STUART, FL 34994

New Principal Place of Business:

1316 NW FEDERAL HWY.
STUART, FL 34994

Current Mailing Address:

1318 NW FEDERAL HWY.
STUART, FL 34994

New Mailing Address:

1316 NW FEDERAL HWY.
STUART, FL 34994

FEI Number: 65-1256224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTAGATA, JULIE A DVM
1318 NW FEDERAL HWY
STUART, FL 34994 US

Name and Address of New Registered Agent:

PAULSEN, JULIE A DVM
1316 NW FEDERAL HWY
STUART, FL 34994 US

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: JULIE PAULSEN

06/17/2009

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: DVM () Delete
Name: SANTAGATA, JULIE A DVM
Address: 1318 NW FEDERAL HWY.
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVM (X) Change () Addition
Name: PAULSEN, JULIE A DVM
Address: 1316 NW FEDERAL HWY.
City-St-Zip: STUART, FL 34994

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: JULIE PAULSEN

DVM

06/17/2009

Electronic Signature of Signing Officer or Director

Date