

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153843

FILED
Apr 26, 2009
Secretary of State

Entity Name: SANTA ROSA ANIMAL HOSPITAL, P.A.

Current Principal Place of Business:

3906 US HIGHWAY 98 WEST
SUITE 23
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

3906 US HIGHWAY 98 WEST
SUITE 23
SANTA ROSA BEACH, FL 32459 US

Current Mailing Address:

3906 US HIGHWAY 98 WEST
SUITE 23
SANTA ROSA BEACH, FL 32459

New Mailing Address:

3906 US HIGHWAY 98 WEST
SUITE 23
SANTA ROSA BEACH, FL 32459 US

FEI Number: 20-3829290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLUMER, ERIN
4 ELEVENTH AVENUE
SUITE 1
SHALIMAR, FL 32579 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: D () Delete
Name: BECK, CHERYL
Address: 3906 US HIGHWAY 98 WEST #23
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: BECK, CHERYL L
Address: 3906 US HIGHWAY 98 WEST #23
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: CHERYL L. BECK

DR.

04/26/2009

Electronic Signature of Signing Officer or Director

Date