2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000043863

Entity Name: PERSONAL ZOO SUPPLY, INC.

FILED Feb 03, 2009 Secretary of State

Current P	Principal Place of Business:	New Principal Place o	of Business:	
9143 LITT NEW POF	LE ROAD RT RICHEY, FL 34654 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
1517 LAKI SYLVAN L	EVIEW _AKE, MI 48320 US			
FEI Number	r: 36-4607087 FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agei	nt: Name and Address of	New Registered Agent:	
SHARP, D 9143 LITT NEW POF				
	e named entity submits this statement for e of Florida.	the purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registere	d Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribution()).		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete SHARP, DONNA M 1517 LAKEVIEW SYLVAN LAKE, MI 48320 US	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete ARNDT, PETER C 1517 LAKEVIEW SYLVAN LAKE, MI 48320 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete KACIR, CHRIS D 9143 LITTLE ROAD NEW PORT RICHEY, FL 34654 US	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	SEC () Delete KACIR, TAMMY L 9143 LITTLE ROAD	Title: (Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: DONNA M SHARP PRES 02/03/2009

NEW PORT RICHEY, FL 34654 US

City-St-Zip: