2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008
Secretary of State

DOCUMENT# P07000062211

Entity Name: ANIMAL EMERGENCY CLINIC OF KEY WEST, INC.

Current Principal Place of Business:

5505 5'TH AVE
KEY WEST, FL 33040 US

New Principal Place of Business:

5450 MACDONALD AVE
13
KEY WEST, FL 33040 US

Current Mailing Address:

5505 5'TH AVE
KEY WEST, FL 33040 US

New Mailing Address:

5450 MACDONALD AVE
13
KEY WEST, FL 33040 US

FEI Number: 65-0639997 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRAMSON, JUDITH
5505 5'TH AVE
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

BRAMSON, JUDITH
5450 MACDONALD AVE
13
KEY WEST, FL 33040 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: LISA BRAMSON 05/27/2008
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: P ( ) Delete
Name: BRAMSON, LISA
Address: 528 HAMMOCK DRIVE
City-St-Zip: KEY WEST, FL 33040 US

Title: DIR ( ) Delete
Name: OWENS, JOHN M IV
Address: 528 HAMMOCK DRIVE
City-St-Zip: KEY WEST, FL 33040 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LISA BRAMSON PRES 05/27/2008
Electronic Signature of Signing Officer or Director Date