

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000094260

FILED
Apr 04, 2012
Secretary of State

Entity Name: MEDICINE WHEEL VETERINARY SERVICES, INC.

Current Principal Place of Business:

6998 NW HWY 27
#105
OCALA, FL 34482 US

New Principal Place of Business:

Current Mailing Address:

2775 NW 49TH AVE
#205-359
OCALA, FL 34482 US

New Mailing Address:

FEI Number: 26-0769488 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SAPP, HAROLD L
3705 SW 298TH ST
NEWBERRY, FL 32669 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

OFFICERS AND DIRECTORS:

Title: PVST
Name: CANTWELL, SHAUNA
Address: #205-359 2775 NW 49TH AVE
City-St-Zip: Ocala, FL 34482 US

Title: D
Name: CANTWELL, SHAUNA
Address: #205-359 2775 NW 49TH AVE
City-St-Zip: Ocala, FL 34482 US

I hereby 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 all other like empowered.

SIGNATURE: SHAUNA CANTWELL

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04/04/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date