2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# P08000068710

Entity Name: ANIMAL MEDICAL CENTER OF BROOKSVILLE, P.A.

Current Principal Place of Business:

3461 SHIRLEY DRIVE
BROOKSVILLE, FL 34602

New Principal Place of Business:

22273 CORTEZ BOULEVARD
BROOKSVILLE, FL 34601

Current Mailing Address:

3461 SHIRLEY DRIVE
BROOKSVILLE, FL 34602

New Mailing Address:

FEI Number: 26-3129442 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAYLOR-SORENSEN, KAREN L
3461 SHIRLEY DRIVE
BROOKSVILLE, FL 34602 US

Name and Address of New Registered Agent:

TAYLOR-SORENSEN, KAREN L DR.
3461 SHIRLEY DRIVE
BROOKSVILLE, FL 34602 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: DR. KAREN TAYLOR-SORENSEN 04/13/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TAYLOR-SORENSEN, KAREN L
Address: 3461 SHIRLEY DRIVE
City-St-Zip: BROOKSVILLE, FL 34602

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TAYLOR-SORENSEN, KAREN L DR
Address: 3461 SHIRLEY DRIVE
City-St-Zip: BROOKSVILLE, FL 34602

Title: P ( ) Change (X) Addition
Name: SORENSEN, CHARLES E
Address: 3461 SHIRLEY DRIVE
City-St-Zip: BROOKSVILLE, FL 34602

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: CHARLES SORENSEN P 04/13/2009
Electronic Signature of Signing Officer or Director Date