

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000089115

FILED
Apr 18, 2012
Secretary of State

Entity Name: CUMBERLAND ANIMAL CLINIC, INC.

Current Principal Place of Business:

5902 SHADY REST ROAD
HAVANA, FL 32333 US

New Principal Place of Business:

Current Mailing Address:

2528 WEST THARPE STREET
TALLAHASSEE, FL 32303 US

New Mailing Address:

FEI Number: 45-3583748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, ANDREW G IV
2528 WEST THARPE STREET
TALLAHASSEE, FL 32303 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: PTD
Name: SIMMONS, ANDREW G IV
Address: 2528 WEST THARPE STREET
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VPSD
Name: WANOUS, MATTHEW
Address: 2528 WEST THARPE STREET
City-St-Zip: TALLAHASSEE, FL 32303

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: ANDREW G. SIMMONS, IV

PRES

04/18/2012

Electronic Signature of Signing Officer or Director

Date