2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 25, 2006 08:00 AM Secretary of State DOCUMENT # P97000065338 PAMELA A. TREDINICK, D.V.M., INC. Principal Place of Business Mailing Address 355 C.R. 309 PO BOX 91 SATSUMA, FL 32189 US SATSUMA, FL 32189 US 01232006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3467422 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCLEOD, ROBERT L II DO NOT WRITE 43 CINCINNATI ST. ST. AUGUSTINE, FL 32084 IN THIS SPACE 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PST TREDINICK, PAMELA A NAME STREET ADDRESS 355 C.R. 309 CITY-ST-ZIP WELAKA, FL 32193 TITI E U00000400271 02/01/06-80046-011 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all pring like empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PANELA A. TREDINICK, DVN

1/22/2006 386-972-47

FILED