

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000093993

FILED
Jan 23, 2009
Secretary of State

Entity Name: DR. KAREN'S ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

1940 KINGS HIGHWAY
SUITE 3
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

Current Mailing Address:

1940 KINGS HIGHWAY
SUITE 3
PORT CHARLOTTE, FL 33980

New Mailing Address:

FEI Number: 59-3544640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEAMANS, KAREN
1940 KINGS HIGHWAY
SUITE 3
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

SEAMANS, KAREN L VMD
1940 KINGS HIGHWAY
SUITE 3
PORT CHARLOTTE, FL 33980 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: KAREN L. SEAMANS VMD PSD

01/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: SEAMANS, KAREN
Address: 1940 KINGS HIGHWAY, SUITE 3
City-St-Zip: PORT CHARLOTTE, FL 33980

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SEAMANS, KAREN L VMD
Address: 1940 KINGS HIGHWAY, SUITE 3
City-St-Zip: PORT CHARLOTTE, FL 33980

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: KAREN L. SEAMANS VMD

PSD

01/23/2009

Electronic Signature of Signing Officer or Director

Date