

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000056296

FILED
Feb 10, 2009
Secretary of State

Entity Name: LAKELAND VETERINARY SERVICES, INC.

Current Principal Place of Business:

2225 DRANE FIELD ROAD
LAKELAND, FL 33811

New Principal Place of Business:

65 SHADOW LANE
LAKELAND, FL 33813

Current Mailing Address:

555 GLEN ABBEY BLVD
KNOXVILLE, TN 37934

New Mailing Address:

3075 LOIS LANE
ALCOA, TN 37701

FEI Number: 59-3583513

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEISLER, SAM D DVM
2225 DRANE FIELD RD
LAKELAND, FL 33811 US

Name and Address of New Registered Agent:

MEISLER, SAM D DVM
65 SHADOW LANE
LAKELAND, FL 33813 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: SAM D MEISLER

02/10/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MEISLER, SAM D
Address: 555 GLEN ABBEY BLVD
City-St-Zip: KNOXVILLE, TN 37934

Title: SVD () Delete
Name: MEISLER, JULIE A
Address: 555 GLEN ABBEY BLVD
City-St-Zip: KNOXVILLE, TN 37934

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MEISLER, SAM D
Address: 813 MARTIN MILL PIKE
City-St-Zip: ROCKFORD, TN 37853

Title: SVD (X) Change () Addition
Name: MEISLER, JULIE A
Address: 813 MARTIN MILL PIKE
City-St-Zip: ROCKFORD, TN 37853

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: SAM D MEISLER PRES

PRES

02/10/2009

Electronic Signature of Signing Officer or Director

Date