

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S64594

FILED
Jan 20, 2011
Secretary of State

Entity Name: MITCHELL HAMMOCK PET HOSPITAL, INC.

Current Principal Place of Business:

255 ALEXANDRIA BLVD.
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

255 ALEXANDRIA BLVD.
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3127681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUDLEY, WOODROW
255 ALEXANDRIA BLVD.
OVIEDO, FL 32765 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: DR
Name: DUDLEY, WOODROW
Address: 255 ALEXANDRIA BLVD.
City-St-Zip: OVIEDO, FL 32765

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: WOODROW DUDLEY DVM

DR.

01/20/2011

Electronic Signature of Signing Officer or Director

Date