

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# S69847

FILED
Jan 31, 2011
Secretary of State

Entity Name: HIGH SPRINGS ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

17925 NW HWY 441
HIGH SPRINGS, FL 32643

New Principal Place of Business:

Current Mailing Address:

17925 NW HWY 441
HIGH SPRINGS, FL 32643

New Mailing Address:

FEI Number: 59-3119029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, LAURA
17925 NW HWY 441
HIGH SPRINGS, FL 32643 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: LAURA COHEN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: COHEN, LAURA
Address: 17925 NW HWY 441
City-St-Zip: HIGH SPGS., FL

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: LAURA COHEN

Electronic Signature of Signing Officer or Director

DVM

01/31/2011

Date