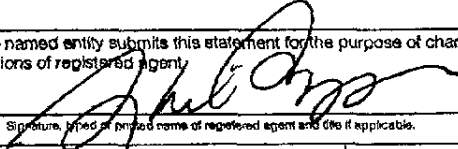


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V26972</b>			
1. Entity Name WESTBAY ANIMAL CENTER, INC.			
Principal Place of Business 6905 CORTEZ RD W BRADENTON, FL 34210 US		Mailing Address 6905 CORTEZ RD W BRADENTON, FL 34210 US	
<b>DO NOT WRITE IN THIS SPACE</b>			
		02222006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0323551	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  SCROGGINS, SHEILA 6905 CORTEZ RD BRADENTON, FL 34210		<b>DO NOT WRITE IN THIS SPACE</b>	
8. 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 2/28/06	
Signature, typed or printed name of registered agent and fee if applicable.		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	DVM		
NAME	SCROGGINS, SHEILA		
STREET ADDRESS	6905 CORTEZ RD		
CITY- ST- ZIP	BRADENTON, FL		
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		3/1/05 941-792-3473	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	