2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 22, 2011
Secretary of State

DOCUMENT# V39581

Entity Name: WILSON VETERINARY CLINIC, INC.

Current Principal Place of Business:

12408 42ND AVE DR WEST
CORTEZ, FL 34215

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 188
CORTEZ, FL 342150189 US

New Mailing Address:

FEI Number: 65-0334057 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, CLAY
12408 42ND AVE DR WEST
CORTEZ, FL 34215 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: PSTD
Name: WILSON, CLAY
Address: 12408 42ND AVE DR WEST
City-St-Zip: CORTEZ, FL 34215

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: CLAY WILSON PRES 08/22/2011

Electronic Signature of Signing Officer or Director — Date