## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V66370

FILED Apr 09, 2009 Secretary of State

Entity Name: VETERINARY EMERGENCY CLINIC, P.A.

Current Principal Place of Business:		New Principal Place of Business:		
	RDOCK CIRC ARLOTTE, FL			
Current Mailing Address:		ss:	New Mailing Address:	
	RDOCK CIRC ARLOTTE, FL			
El Number	: 65-0366933	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	l Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
475 KING	CHARD H SS HIGHWAY	US		
AKE SUZ	_1,1 L	00		
	·		purpose of changing its registere	ed office or registered agent, or both,
he above	named entity e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
he above the State	e named entity e of Florida RE:			ed office or registered agent, or both,  Date
the above the State	named entity e of Florida RE: Electro	submits this statement for the		
The above the State SIGNATUI	named entity e of Florida RE: Electro	submits this statement for the particle of Registered Aging Trust Fund Contribution ( ).	ent	
The above the State of the Stat	e named entity e of Florida.  RE: Electro mpaign Financi  S AND DIREC  D ( FLUHARTY, G 3300 TAMIAM	submits this statement for the price of Registered Agency Trust Fund Contribution ( ).  CTORS:  ) Delete REGORY B	ent	Date
The above the State SIGNATUI	e named entity e of Florida.  RE:  Electro  mpaign Financir  S AND DIRECT  D ( FLUHARTY, G 3300 TAMIAM PORT CHARL  D ( MCDONOUGH 23041 HARBO	submits this statement for the price of Registered Age of Trust Fund Contribution ( ).  CTORS:  ) Delete REGORY B ITRAIL P.C. OTTE, FL 33952  ) Delete	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date  BES TO OFFICERS AND DIRECTOR

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: GREGORY B. FLUHARTY D 04/09/2009