2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2016
Secretary of State
CC1489872511

DOCUMENT# N04000000021

Entity Name: RIVER CITY COMMUNITY ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

844 WHITLOCK RD
JACKSONVILLE, FL 32211

Current Mailing Address:

P.O BOX 551344
JACKSONVILLE, FL 32255 US

FEI Number: 51-0496203

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHESSER DAVIS , STACEY R
844 WHITLOCK AVE.
JACKSONVILLE, FL 32211 US

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: STACEY R. CHESSER DAVIS 04/18/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREA	Title	PRES
Name	DAVIS, STACEY RCHESSER	Name	GIONET, PAT
Address	6236 PINELOCK DRIVE	Address	7433 SYCAMORE ST
City-State-Zip:	JACKSONVILLE FL 32211	City-State-Zip:	JACKSONVILLE FL 32208

Title	S
Name	NADEAU, LUCY
Address	3586 MORGANS WAY
City-State-Zip:	YULEE FL 32097

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STACEY RCHESSER DAVIS VICE PRESIDENT 04/18/2016

Electronic Signature of Signing Officer/Director Detail — Date