

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J70821

Entity Name: CLAY COUNTY ANIMAL HOSPITAL, INC.

Current Principal Place of Business:

332 PARKRIDGE AVE
ORANGE PARK, FL 32065-7507

Current Mailing Address:

332 PARKRIDGE AVE
ORANGE PARK, FL 32065-7507 US

FEI Number: 59-2801874

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAUMAN, SHEILA
332 PARKRIDGE AVE
ORANGE PARK, FL 32065 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PVST
Name NAUMAN, SHEILA
Address 332 PARKRIDGE AVE
City-State-Zip: ORANGE PARK FL 32065

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: SHEILA W. NAUMAN

PVST

05/10/2017

Electronic Signature of Signing Officer/Director Detail

Date