## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L40564

Entity Name: LAKE OSBORNE ANIMAL CLINIC, INC.

**Current Principal Place of Business:** 

1502 LAKE OSBORNE DR LAKE WORTH. FL 33461

## **Current Mailing Address:**

1502 LAKE OSBORNE DR LAKE WORTH, FL 33461

FEI Number: 65-0163973 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LYNCH, JOHN T DVM 1502 LAKE OSBORNE DR LAKE WORTH, FL 33461 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: JOHN T LYNCH DVM 03/30/2016

Electronic Signature of Registered Agent

Date

FILED Mar 30, 2016

**Secretary of State** 

CC5673102404

## Officer/Director Detail:

Title D

Name LYNCH, JOHN T DVM
Address 1502 LAKE OSBORNE DR
City-State-Zip: LAKE WORTH FL 33461

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: JOHN T LYNCH DVM

**DIRECTOR** 

03/30/2016