2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2016
Secretary of State
CC7312521331

DOCUMENT# P11000089115

Entity Name: CUMBERLAND ANIMAL CLINIC, INC.

Current Principal Place of Business:

5902 SHADY REST ROAD
HAVANA, FL 32333

Current Mailing Address:

2528 WEST THARPE STREET
TALLAHASSEE, FL 32303 US

FEI Number: 45-3583748

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAPMAN, J. STANLEY ESQ.
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 32301 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: J. STANLEY CHAPMAN 04/26/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PTD	Title	VPSD
Name	SIMMONS, ANDREW G IV	Name	WANOUS, MATTHEW
Address	2528 WEST THARPE STREET	Address	2528 WEST THARPE STREET
City-State-Zip:	TALLAHASSEE FL 32303	City-State-Zip:	TALLAHASSEE FL 32303

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: ANDREW G. SIMMONS IV P 04/26/2016

Electronic Signature of Signing Officer/Director Detail — Date