

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000066944

**Entity Name:** WEST PALM ANIMAL CLINIC, INC.

**Current Principal Place of Business:**

2254 N MILITARY TRAIL  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

2254 N MILITARY TRAIL  
WEST PALM BEACH, FL 33409

**FEI Number:** 65-0493339

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DURKEE, MICHELLE  
2254 N MILITARY TRAIL  
WEST PALM BEACH, FL 33409 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:** MICHELLE DURKEE

04/01/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name DURKEE, MICHELLE DVM  
Address 2254 N MILITARY TRAIL  
City-State-Zip: WEST PALM BEACH FL 33409

*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:** MICHELLE DURKEE

PD

04/01/2014

Electronic Signature of Signing Officer/Director Detail

Date