## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042890

Entity Name: EDGEWATER ANIMAL HOSPITAL, LLC

**Current Principal Place of Business:** 

5925 EDGEWATER DRIVE ORLANDO. FL 32810

**Current Mailing Address:** 

5925 EDGEWATER DRIVE ORLANDO, FL 32810

FEI Number: 20-4828435 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOWEN, GARY I 5925 EDGEWATER DRIVE ORLANDO, FL 32810 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

FILED Jan 12, 2013

**Secretary of State** 

CC8351091486

## Authorized Person(s) Detail:

Title MGRM

Name BOWEN, GARY I

Address 5925 EDGEWATER DRIVE

City-State-Zip: ORLANDO FL 32810

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY I BOWEN MGRM 01/12/2013