

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000066296

Entity Name: KEENE VETERINARY HOSPITAL LLC

Current Principal Place of Business:

4542 W VILLAGE DRIVE
TAMPA, FL 33624

Current Mailing Address:

4542 W VILLAGE DRIVE
TAMPA, FL 33624 US

FEI Number: 27-0512612

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEENE, TERRENCE SDR
4542 W VILLAGE DR
TAMPA, FL 33624 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

Authorized Person(s) Detail :

Title MGRM
Name KEENE, TERRENCE SDR
Address 4542 W VILLAGE DRIVE
City-State-Zip: TAMPA FL 33624

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TERRENCE S KEENE

MGRM

02/04/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date