#### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000059884

Entity Name: ANIMAL MEDICAL CLINIC INDIALANTIC, PLLC

FILED
Apr 06, 2017
Secretary of State
CC6386854293

# **Current Principal Place of Business:**

407 4TH AVENUE INDIALANTIC, FL 32903

### **Current Mailing Address:**

4020 S BABCOCK ST. MELBOURNE. FL 32901 US

FEI Number: 47-3641691 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

ANDERSON, J. PATRICK 2200 FRONT ST. SUITE 301 MELOURNE, FL 32901 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 MBR

Name ANIMAL MEDICAL CLINIC (GODWIN

AND JOINER)

Address 4020 S BADCOCK ST.

City-State-Zip: MELBOURNE FL 32901

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: JEFFREY S GODWIN DVM

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT 04/0

Date

04/06/2017