

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000007250

**Entity Name:** VETERINARY MANAGEMENT AND NUTRITION SERVICES, LLC

**Current Principal Place of Business:**

1010 E. MAGNOLIA LOOP  
MADISON, GA 30650

**Current Mailing Address:**

39934 US HIGHWAY 19 NORTH  
TARPON SPRINGS, FL 34689 US

**FEI Number:** 81-5060859

**Certificate of Status Desired:** Yes

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

GARCIA, ANAPATRICIA  
39934 US HIGHWAY 19 NORTH  
TARPON SPRINGS, FL 34689 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:** ANAPATRICIA GARCIA

02/21/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	OTALORA, RAUL	Name	GARCIA, ANAPATRICIA
Address	1010 E. MAGNOLIA LOOP	Address	1010 E. MAGNOLIA LOOP
City-State-Zip:	MADISON GA 30650	City-State-Zip:	MADISON GA 30650

*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:** ANAPATRICIA GARCIA

CEO/OWNER

02/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date