2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 259379

Entity Name: JMI-DANIELS PHARMACEUTICALS, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2517 25TH AVE NORTH ST PETERSBURG, FL 33713 US **Current Mailing Address: New Mailing Address:** 501 FIFTH STREET ATTN: P. POPE BRISTOL, TN 37620 US FEI Number: 59-0979811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition MACIONE, KYLE P MARKISON, BRIAN A Name: Name: 142 E. MAIN STREET 1742 STUART ROAD WEST Address: Address: City-St-Zip: ABINGDON, VA 24210 City-St-Zip: PRINCETON, NJ 08540 Title: Title: CEOC (X) Delete () Change () Addition Name: GREGORY, JEFFERSON J Name: 221 MEMORY LANE Address: Address: BRISTOL, TN 37620 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BELLAMY, JOHN A Name: Name: 1237 WATAUGA ST Address: Address: City-St-Zip: KINGSPORT, TN 37660 City-St-Zip: Title: CFOT () Delete Title: CFOT (X) Change () Addition LATTANZI, JAMES R LATTANZI, JAMES R Name: Name: Address: 207 WILLOW RIDGE ROAD Address: 207 WILLOW RIDGE ROAD City-St-Zip: JOHNSON CITY, IN City-St-Zip: JOHNSON CITY, TN 37604 Title: Title: () Change (X) Addition () Delete AS/S Name: Name: PHILLIPS, WILLIAM L III Address: 3400 BONDWOOD CIRCLE Address: City-St-Zip: City-St-Zip: JOHNSON CITY, TN 37604

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES R. LATTANZI CFO 04/25/2005