

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 583828

FILED
Mar 24, 2005
Secretary of State

Entity Name: HARRINGTON'S PROFESSIONAL ARTS PHARMACY, INC.

Current Principal Place of Business:

848 1ST AVE., N.
NAPLES, FL 341026063 US

New Principal Place of Business:

Current Mailing Address:

848 1ST AVE., N.
NAPLES, FL 341026063 US

New Mailing Address:

FEI Number: 59-1839808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYES, SUANN E
100 VIA NAPOLI WAY
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

HAYES, SUANN E
4005 GULFSHORE BLVD #905
NAPLES, FL 34103 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: SUANN E. HAYES

03/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAYES, SUANN E.
Address: 100 VIA NAPOLI WAY
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAYES, SUANN E.
Address: 4005 GULFSHORE BLVD. #905
City-St-Zip: NAPLES, FL 34103

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: SUANN E. HAYES

P

03/24/2005

Electronic Signature of Signing Officer or Director

Date