2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003452

City-St-Zip:

WINDERMERE, FL 34786

Entity Name: PHARMACY MANAGEMENT COMPANY

FILED Apr 26, 2002 8:00 AM Secretary of State

Current Principal	Place of Business:	New Principal Place o	New Principal Place of Business:	
4602 35TH STREE ORLANDO, FL 32				
Current Mailing Address:		New Mailing Address	New Mailing Address:	
PO BOX 2241 WINDERMERE, F	L 34786			
FEI Number: 61-1362	564 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:			New Registered Agent:	
FRY, THOMAS J 1245 OAKDALE S' WINDERMERE, F				
The above named in the State of Flori	entity submits this statement for the ida.	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
E	lectronic Signature of Registered Ag	ent	Date	
	igible to satisfy its Intangible Tax filing red inancing Trust Fund Contribution ().	quirement and elects to do so (X).		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
·	() Delete HOMAS J	Title: Name:	() Change () Addition	

City-St-Zip:

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: THOMAS J FRY D 04/26/2002