

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000436

FILED
Apr 28, 2008
Secretary of State

Entity Name: COLLEGE PARK DRUGSTORE, LLC

Current Principal Place of Business:

3348 EDGEWATER DRIVE
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

3348 EDGEWATER DRIVE
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 20-0543976 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DEMETREE, MARY L
3348 EDGEWATER DRIVE
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

WILLIAM C. DEMETREE FAMILY OFFICE, INC.
3348 EDGEWATER DRIVE
ORLANDO, FL 32804 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: C. L. SCHULER

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WM C DEMETREE MARITA, L NON GST EXEM P T TRUST
Address: 3348 EDGEWATER DR
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WM C DEMETREE MARITA, L NON GST EXEM P T TRUST
Address: 3348 EDGEWATER DR
City-St-Zip: ORLANDO, FL 32804

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SARA N. DEMETREE

TRTE

04/28/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date