2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000055296

Title:

Name:

Address:

City-St-Zip:

Entity Name: CANADIAN DRUG DISCOUNTERS OF WINTER HAVEN, INC

FILED Jan 30, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	KE OTIS DRIVE HAVEN, FL 338) AUDUBON NTER HAVE	I ROAD EN, FL 33884	US	
Current Mailing Address:				New Mailing Address:			
	JBON ROAD HAVEN, FL 338	884					
FEI Number	: 83-0358129	FEI Number Applied For () FEI Number	Not Applicable	e () Certi	ficate of Status Des	sired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
140 AUDL	FORD, KIM K M JBON ROAD HAVEN, FL 338						
	named entity s e of Florida.	ubmits this statement for	the purpose of ch	anging its re	gistered office o	or registered age	nt, or both,
SIGNATUI	RE:						
	Electroni	c Signature of Registere	d Agent			Date	
Election Ca	mpaign Financing	Trust Fund Contribution ()					
OFFICERS AND DIRECTORS:			A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () JORDAN, ALEJA 1225 N. LAKE O WINTER HAVEN	TIS DRIVE		ne: JOF lress: 121	(X) Chang RDAN, ALEJANDRO CHAUCER LANE NTER HAVEN, FL		
Title: Name: Address: City-St-Zip:	V () JORDAN, A. NIC 1225 N. LAKE O WINTER HAVEN	TIS DRIVE		ne: JOF lress: 121	(X) Chan RDAN, A. NICOLE I CHAUCER LANE NTER HAVEN, FL		
Title: Name: Address: Citv-St-Zip:	V () RUTHERFORD, 140 AUDUBON I WINTER HAVEN	ROAD			()Chang	ge () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ALEJANDRO JORDAN, JR P 01/30/2006

() Delete

RUTHERFORD, KIMBERLY K

WINTER HAVEN, FL 33884 US

140 AUDUBON ROAD

() Change () Addition