

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000014585

FILED
Apr 17, 2009
Secretary of State

Entity Name: DIRECTSCRIPT CARE SERVICES, INC.

Current Principal Place of Business:

7501 CURRENCY DRIVE
ORLANDO, FL 32809

New Principal Place of Business:

8963 MORGAN COURT
NAPLES, FL 34113

Current Mailing Address:

7501 CURRENCY DRIVE
ORLANDO, FL 32809

New Mailing Address:

8963 MORGAN COURT
NAPLES, FL 34113

FEI Number: 36-4235843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERUBE, PAUL J
7501 CURRENCY DRIVE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

REEVES, MACHAEL J
101 E. KENNEDY BOULEVARD, SUITE 2700
TAMPA, FL 33602 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: MICHAEL J REEVES

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: BERUBE, PAUL J
Address: 7501 CURRENCY DRIVE
City-St-Zip: ORLANDO, FL 32809

Title: SEC (X) Delete
Name: WELLS, MARK A
Address: 7501 CURRENCY DRIVE
City-St-Zip: ORLANDO, FL 32809

Title: TREA (X) Delete
Name: WELLS, MARK A
Address: 7501 CURRENCY DRIVE
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BERUBE, PAUL J
Address: 8963 MORGAN COURT
City-St-Zip: NAPLES, FL 34113

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: PAUL J BERUBE

CEO

04/17/2009

Electronic Signature of Signing Officer or Director

Date