

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000079709

FILED
Apr 28, 2003
Secretary of State

Entity Name: GENESIS PHARMACY SERVICES, INC.

Current Principal Place of Business:

6206 BENJAMIN ROAD
SUITE 314
TAMPA, FL 33634 US

New Principal Place of Business:

5710 HOOVER BLVD.
TAMPA, FL 33634 US

Current Mailing Address:

6206 BENJAMIN ROAD
SUITE 314
TAMPA, FL 33634 US

New Mailing Address:

5710 HOOVER BLVD.
TAMPA, FL 33634 US

FEI Number: 59-3468608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKEL, MARK P.
6206 BENJAMIN ROAD
SUITE 314
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

BECKEL, JACOB J
5710 HOOVER BLVD.
TAMPA, FL 33634 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: JACOB J. BECKEL

04/28/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: ST () Delete
Name: BECKEL, MARK P.
Address: 6206 BENJAMIN ROAD, SUITE 314
City-St-Zip: TAMPA, FL 33634

Title: P () Delete
Name: BECKEL, JACOB
Address: 6206 BENJAMIN ROAD, #314
City-St-Zip: TAMPA, FL 33634

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BECKEL, MARK P.
Address: 5710 HOOVER BLVD.
City-St-Zip: TAMPA, FL 33634

Title: P (X) Change () Addition
Name: BECKEL, JACOB J
Address: 5710 HOOVER BLVD.
City-St-Zip: TAMPA, FL 33634

Title: ST () Change (X) Addition
Name: MECKLEY, MICHAEL S
Address: 5710 HOOVER BLVD.
City-St-Zip: TAMPA, FL 33634

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: MICHAEL S. MECKLEY

ST

04/28/2003

Electronic Signature of Signing Officer or Director

Date