

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 257023

Entity Name: BAY PHARMACY INC

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2 EAST MAGNOLIA AVENUE  
EUSTIS, FL 32726

**New Principal Place of Business:**

**Current Mailing Address:**

2 EAST MAGNOLIA AVENUE  
EUSTIS, FL 32726

**New Mailing Address:**

FEI Number: 59-0951081

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WARREN, GEORGE W  
2 EAST MAGNOLIA AVE  
EUSTIS, FL 32726 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DV  
Name: WARREN, GEORGE W.  
Address: 2805 JOANNA DR.  
City-St-Zip: EUSTIS, FL 32726

Title: DTS  
Name: WARREN, DORIS S  
Address: 2805 JOANNA DR.  
City-St-Zip: EUSTIS, FL 32726

I hereby 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 all other like empowered.

SIGNATURE: JILL R. GRECO

SUPV

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date