

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000000223

Entity Name: LYNNFIELD COMPOUNDING CENTER, INC.**Current Principal Place of Business:**12 KENT WAY
SUITE 120
BYFIELD, MA 01922**Current Mailing Address:**12 KENT WAY
SUITE 120
BYFIELD, MA 01922**FEI Number:** 58-2593075**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PT
Name	HALL, JEFFREY L
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	AS
Name	GANDHI, GAURANG
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	S
Name	AKINS, MARTIN P
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	VPD
Name	EBLING, KEITH J
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	AS
Name	IWINSKI, VAL
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	AS
Name	MCGINNIS, CHRIS
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

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: MARTIN P. AKINS**SECRETARY****04/26/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date