

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000014826

Entity Name: ISLAND PHARMACY, INC.**Current Principal Place of Business:**2330 PALM RIDGE ROAD
#12
SANIBEL, FL 33957**Current Mailing Address:**2330 PALM RIDGE ROAD
#12
SANIBEL, FL 33957 US**FEI Number:** 20-8373040**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NORTHROP FINANCIAL GROUP, LLC
13700 SIX MILE CYPRESS PKWY
SUITE 2
FORT MYERS, FL 33912 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:** SHANE NORTHROP, CPA

04/22/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	MATHAI, RAJIMON
Address	2330 PALM RIDGE ROAD #12
City-State-Zip:	SANIBEL FL 33957

Title	DIRECTOR
Name	MATHAI, JOSHUA
Address	2330 PALM RIDGE ROAD #12
City-State-Zip:	SANIBEL FL 33957

Title	STD
Name	MATHAI, MAREENA
Address	2330 PALM RIDGE ROAD #12
City-State-Zip:	SANIBEL FL 33957

Title	DIRECTOR
Name	MATHAI, GRACE
Address	2330 PALM RIDGE ROAD #12
City-State-Zip:	SANIBEL FL 33957

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: MATHAI , RAJIMON

PD

04/22/2022

Electronic Signature of Signing Officer/Director Detail

Date