

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000071296

Entity Name: SPECIALTY PHARMACY SERVICES, INC.

Current Principal Place of Business:

800 E. MELBOURNE AVE
MELBOURNE, FL 32901

Current Mailing Address:

800 E. MELBOURNE AVE
MELBOURNE, FL 32901 US

FEI Number: 59-3400186

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THALWITZER, AARON ESQ
1990 W. NEW HAVEN AVE
STE 201
MELBOURNE, FL 32904 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 P
Name LAVANGO, VITO F
Address 800 E. MELBOURNE AVE
City-State-Zip: MELBOURNE FL 32901

Title TREASURER
Name LAVANGO, KRISTINE
Address 800 E. MELBOURNE AVE
City-State-Zip: MELBOURNE FL 32901

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: VITO F. LAVANGO _____

PRESIDENT

04/05/2017

Electronic Signature of Signing Officer/Director Detail

_____ Date