

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 24, 2013
Secretary of State
CC8920273772

Entity Name: PHARMACY PARTNERS LLC

Current Principal Place of Business:

1008 BELMONT PL
BOYNTON BEACH, FL 33436

Current Mailing Address:

1008 BELMONT PL
BOYNTON BEACH, FL 33436

FEI Number: 27-0711389

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLEHER, CASEY
1008 BELMONT PL
BOYNTON BEACH, FL 33436 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

Authorized Person(s) Detail :

Title MGRM
Name REVOCABLE TRUST FBO FRED MARCON
Address 79 CHESTNUT STREET- STE 101
City-State-Zip: RIDGEWOOD NJ 07450

Title MGRM
Name KELLEHER, CASEY
Address 1008 BELMONT PL
City-State-Zip: BOYNTON BEACH FL 33436

Title MGRM
Name HAGGERTY, WILLIAM J
Address 79 CHESTNUT STREET- STE 101
City-State-Zip: RIDGEWOOD NJ 07450

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM HAGGERTY

CPA

01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date