

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000007273

**Entity Name:** H.D. SMITH WHOLESALE DRUG CO.

**Current Principal Place of Business:**

1901 NW 25TH AVE.  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

3063 FIAT AVENUE  
SPRINGFIELD, IL 62703

**FEI Number:** 37-0709250

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 CCEO  
Name SMITH, HENRY DJR.  
Address 2217 GREENSIDE DRIVE  
City-State-Zip: SPRINGFIELD IL 62704

Title PCOO  
Name SMITH, JAMES C  
Address 2608 HAZELNUT  
City-State-Zip: SPRINGFIELD IL 62702

Title S  
Name KELLY, KEVIN  
Address 3063 FIAT AVENUE  
City-State-Zip: SPRINGFIELD IL 62703

Title D  
Name ROGERS, SMITH  
Address 3063 FIAT AVENUE  
City-State-Zip: SPRINGFIELD IL 62703

Title D  
Name DANAHY, JOHN  
Address 3063 FIAT AVENUE  
City-State-Zip: SPRINGFIELD IL 62703

Title AS  
Name TAMAYO, HAROLD  
Address 3063 FIAT AVENUE  
City-State-Zip: SPRINGFIELD IL 62703

*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:** HAROLD TAMAYO

**CORPORATE  
CONTROLLER**

**04/23/2014**

Electronic Signature of Signing Officer/Director Detail

Date