

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 282845

Entity Name: A&E PHARMACY INC

FILED
May 04, 2007
Secretary of State

Current Principal Place of Business:

923 N. NEW WARRINGTON ROAD
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

923 N. NEW WARRINGTON ROAD
PENSACOLA, FL 32506 US

New Mailing Address:

FEI Number: 59-1082194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENFINGER, DAVID E PRES.
3553 MAI KAI DR.
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: ENFINGER, ARTHUR L V-PRES
Address: 9487 CHUMUCLA SPRINGS ROAD
City-St-Zip: JAY, FL 32565 US

Title: ST () Delete
Name: ENFINGER, RHONDA J SEC/TR
Address: 909 N. NEW WARRINGTON RD
City-St-Zip: PENSACOLA, FL 32506 US

Title: P () Delete
Name: ENFINGER, DAVID E PRES
Address: 3553 MAI KAI DRIVE
City-St-Zip: PENSACOLA, FL 32526 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: ENFINGER, ARTHUR L V-PRES
Address: 3051 OAK POINTE DR
City-St-Zip: PENSACOLA, FL 32505 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID E ENFINGER

P

05/04/2007

Electronic Signature of Signing Officer or Director

Date