

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 293052

Entity Name: CHARLES PHARMACY INC

FILED  
Jun 09, 2008  
Secretary of State

## Current Principal Place of Business:

5987 BERRYHILL RD  
5987 BERRYHILL RD  
MILTON, FL 32570 US

## New Principal Place of Business:

## Current Mailing Address:

5987 BERRYHILL RD  
MILTON, FL 32570 US

## New Mailing Address:

FEI Number: 59-1095372

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VANLANDINGHAM, CHARLES F  
6253 WILLARD NORRIS RD.  
MILTON, FL 32570 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: VANLANDINGHAM, CHARLES F  
Address: 6253 WILLARD NORRIS RD.  
City-St-Zip: MILTON, FL

Title: VD ( ) Delete  
Name: WILLIAMS, OSWELL  
Address: 5341 BISHOP RD.  
City-St-Zip: MILTON, FL

Title: MDS ( ) Delete  
Name: VANLANDINGHAM, MARCHETA  
Address: 6253 WILLARD NORRIS RD  
City-St-Zip: MILTON, FL

Title: TD ( ) Delete  
Name: WILLIAMS, ELAINE  
Address: 5341 BISHOP RD.  
City-St-Zip: MILTON, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHARLES F VANLANDINGHAM

PRES

06/09/2008

Electronic Signature of Signing Officer or Director

Date