

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 351175

FILED
Mar 30, 2011
Secretary of State

Entity Name: WEISE PRESCRIPTION SHOP, INC.

Current Principal Place of Business:

4343 COLONIAL AVE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

4343 COLONIAL AVE
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 59-1269400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISE, JO H PRES
8601 EMERALD ISLE CIRCLE N
JACKSONVILLE, FL 32216 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

OFFICERS AND DIRECTORS:

Title: P
Name: WEISE, JO H
Address: 8601 EMERALD ISLE CIR.N.
City-St-Zip: JACKSONVILLE, FL 32216

Title: D
Name: WEISE, GILBERT N SR
Address: 4212 DEMEDICI AVE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D
Name: WEISE, JUSTIN
Address: 447 EAST 5TH ST
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: D
Name: WEISE, GILBERT N JR.
Address: 1855 COPPERSTONE DR. UNIT E
City-St-Zip: JACKSONVILLE, FL 32003

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: JO HELEN WEISE

P

03/30/2011

Electronic Signature of Signing Officer or Director

Date