

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90306 029 ***150.00

DOCUMENT # 550669

1. Entity Name
RITE AID OF FLORIDA, INC.



Principal Place of Business
30 HUNTER LANE
CAMP HILL, PA 17011

Mailing Address
C/O TAX DEPT
P O BOX 3165
HARRISBURG, PA 17105



04062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-2047226

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	KRAHULEC, JAMES
STREET ADDRESS	30 HUNTER LANE
CITY-ST-ZIP	CAMP HILL, PA 17011
TITLE	V
NAME	BLACK, KENNETH
STREET ADDRESS	30 HUNTER LANE
CITY-ST-ZIP	CAMP HILL, PA 17011
TITLE	P
NAME	TWOMEY, KEVIN
STREET ADDRESS	30 HUNTER LANE
CITY-ST-ZIP	CAMP HILL, PA 17011
TITLE	VSD
NAME	SARI, ROBERT B
STREET ADDRESS	30 HUNTER LANE
CITY-ST-ZIP	CAMP HILL, PA 17011
TITLE	T
NAME	GERSHENSON, GLENN
STREET ADDRESS	30 HUNTER LANE
CITY-ST-ZIP	CAMP HILL, PA 17011
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Kenneth C. Black

KENNETH C. BLACK

4/6/05

(717)244-2550

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #