## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 660693** 

Address:

City-St-Zip:

214 US HWY 41S CITRUS PL

INVERNESS, FL

Entity Name: BALL'S REXALL DRUGS INC.

FILED Mar 23, 2009 Secretary of State

Littly Na	IIIE. DALLORI	EXALL DRUGG, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	LAZA, 214 US SS, FL 34450	HWY 41 S. US		
Current Mailing Address:			New Mailing Address	:
	LAZA, 214 US SS, FL 34450	HWY 41 S. US		
FEI Number	: 59-1984673	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:	
HEIMANN 214 US HV INVERNES	, KEN WY 41 S. CITRU SS, FL 32650	JS PLAZA US		
	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	office or registered agent, or both,
SIGNATU	RE:			
	Electron	ic Signature of Registered Age	ent	Date
Election Car	mpaign Financing	Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VP () HEIMANN, TINA 214 US HWY 41 INVERNESS, FL	S CITRUS PL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name:	P () HEIMANN, KEN,	Delete	Title: Name:	( ) Change ( ) Addition

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: KENNETH HEIMANN P 03/23/2009