

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 735242 (0)  
1. Corporation Name  
FLORIDA ASSOCIATION OF DRUG WHOLESALERS, INC.



Principal Place of Business Mailing Address  
2702 DIRECTORS ROW  
ORLANDO FL 32809  
US 2702 DIRECTORS ROW  
ORLANDO FL 32809  
US

3. Date Incorporated or Qualified 03/12/1976 3a. Date of Last Report 05/01/1995  
4. FEI Number 59-1655463 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip Country 29 Zip Country 30  
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALKER, REX  
2702 DIRECTORS ROW  
ORLANDO FL 32809

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP  
DP PARDON JR P V 915 CHAD LAKE TAMPA FL ☒ DELETE  
STD WALKER, REX H 2702 DIRECTORS ROW ORLANDO FL ☐ DELETE  
D HARPER, BILL 2702 DIRECTORS ROW ORLANDO FL ☐ DELETE  
☐ DELETE  
☐ DELETE  
☐ DELETE

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP  
2.1 TITLE Director/President 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP ☒ Change ☐ Addition  
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ☐ Change ☐ Addition  
4.1 TITLE Secretary/Treasurer 4.2 NAME Jeff Greer 4.3 STREET ADDRESS 2100 Directors Row 4.4 CITY-ST-ZIP Orlando, FL 32809 ☐ Change ☒ Addition  
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Change ☐ Addition  
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 23, 1996 407-886239  
Date Daytime Phone #  
SC 3-26-96

CR2E037 (12/95)