

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827621

FILED  
Mar 10, 2005  
Secretary of State

Entity Name: CLARKMAR DRUG CORPORATION

**Current Principal Place of Business:**

1610 FISKE BLVD  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

1610 FISKE BLVD  
ROCKLEDGE, FL 32955

**New Mailing Address:**

FEI Number: 75-1158119

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAY, DAVID C.  
1610 FISKE BLVD.  
ROCKLEDGE, FL 32955 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RAY, DAVID C.  
Address: 1407 ROCKLEDGE DR  
City-St-Zip: ROCKLEDGE, FL

Title: VD ( ) Delete  
Name: RAY, DAVID T  
Address: 1020 NW 108 LANE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: STD ( ) Delete  
Name: RAY, FRANCES A.  
Address: 1407 ROCKLEDGE DR  
City-St-Zip: ROCKLEDGE, 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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID C RAY

PRES

03/10/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date