2008 LIMITED PARTNERSHIP ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# A97000000761

Entity Name: PHYSICIAN SALES & SERVICE LIMITED PARTNERSHIP

Current Principal Place of Business:

4345 SOUTHPOINT BOULEVARD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4345 SOUTHPOINT BOULEVARD
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3475763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

GENERAL PARTNER INFORMATION:

Document #: G36074
Name: PSS WORLD MEDICAL, INC.
Address: 4345 SOUTHPOINT BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32256

ADDRESS CHANGES ONLY:

Address:
City-St-Zip: JACKSONVILLE, FL 32216

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: DAVID D. KLARNER VP 04/18/2008

Electronic Signature of Signing General Partner — Date