

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000255

FILED
Apr 24, 2009
Secretary of State

Entity Name: SPECIALTY PHARMACY, INC.

Current Principal Place of Business:

1300 MORRIS DRIVE
CHESTERBROOK, PA 19087 US

New Principal Place of Business:

309 HENDERSON DRIVE
SHARON HILL, PA 19079 US

Current Mailing Address:

1300 MORRIS DRIVE
CHESTERBROOK, PA 19087 US

New Mailing Address:

FEI Number: 23-3003463 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JOHNSON, MARK
Address: 1300 MORRIS DRIVE, SUITE 100
City-St-Zip: CHESTERBROOK, PA 19087

Title: DVCF () Delete
Name: DICANDILO, MICHAEL D
Address: 1300 MORRIS DRIVE, SUITE 100
City-St-Zip: CHESTERBROOK, PA 19087

Title: VGCS () Delete
Name: CHOU, JOHN
Address: 1300 MORRIS DR
City-St-Zip: CHESTERBROOK, PA 19087

Title: VPCT () Delete
Name: QUINN, J F
Address: 1300 MORRIS DRIVE
City-St-Zip: CHESTERBROOK, PA 19087

Title: AS () Delete
Name: HIRST, DANIEL T
Address: 1300 MORRIS DRIVE
City-St-Zip: CHESTERBROOK, PA 19087

Title: D () Delete
Name: YOST, DAVID R
Address: 1300 MORRIS DRIVE, SUITE 100
City-St-Zip: CHESTERBROOK, PA 19087

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DEVP (X) Change () Addition
Name: DICANDILO, MICHAEL D
Address: 1300 MORRIS DRIVE, SUITE 100
City-St-Zip: CHESTERBROOK, PA 19087

Title: DSGC (X) Change () Addition
Name: CHOU, JOHN G
Address: 1300 MORRIS DR
City-St-Zip: CHESTERBROOK, PA 19087

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: YOST, R DAVID
Address: 1300 MORRIS DRIVE, SUITE 100
City-St-Zip: CHESTERBROOK, PA 19087

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: DANIEL T. HIRST

AS

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date