

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002800

FILED
Apr 04, 2011
Secretary of State

Entity Name: PORTLAND PROFESSIONAL PHARMACY ASSOCIATES INC.

Current Principal Place of Business:

53 DARLING AVENUE
SOUTH PORTLAND, ME 04106

New Principal Place of Business:

Current Mailing Address:

2441 WARRENVILLE ROAD, SUITE 610
LISLE, IL 60532

New Mailing Address:

FEI Number: 01-0516051

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

OFFICERS AND DIRECTORS:

Title: PD
Name: THIERER, MARK CEO
Address: 2441 WARRENVILLE ROAD, SUITE 610
City-St-Zip: LISLE, IL 60532

Title: TSD
Name: PARK, JEFFREY CFOEVP
Address: 2441 WARRENVILLE ROAD, SUITE 610
City-St-Zip: LISLE, IL 60532

I hereby 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 all other like empowered.

SIGNATURE: JEFFREY PARK

CFO

04/04/2011

Electronic Signature of Signing Officer or Director

Date