2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000007273

Entity Name: H.D. SMITH WHOLESALE DRUG CO

FILED Feb 26, 2008 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:	
3063 FIAT SPRINGFI	AVENUE ELD, IL 62703	3			
Current Mailing Address:				lailing Address:	
3063 FIAT SPRINGFI	AVENUE ELD, IL 62703	3			
FEI Number:	: 37-0709250	FEI Number Applied For()	FEI Number Not A	Applicable () Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name a	and Address of New Registered Agent:	
1201 HAYS		CE COMPANY 012525 US			
	named entity e of Florida.	submits this statement for the p	urpose of changi	ng its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS	S AND DIREC	TORS:	ADDIT	IONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (SMITH, HENR` 2217 GREENS SPRINGFIELD	IDE DRIVE	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	S (SMITH, JAMES 2608 HAZELNI SPRINGFIELD	Л	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D (SMITH, ROGE 3063 FIAT AVE SPRINGIFIELD	NUE	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D (TRACY, PATR 3063 FIAT AVE SPRINGFIELD	ENUE	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	D (KELLY, KEVIN 3063 FIAT AVE SPRINGFIELD	ENUE	Title: Name: Address: City-St-Z		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Z		

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: JOHN VOSS ASEC 02/26/2008