2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F57484

FILED Apr 30, 2007 Secretary of State

Entity Name: PARKWOOD PHARMACY, INC.	
Current Principal Place of Business:	New Principal Place of Business:
7920 CONGRESS ST PORT RICHEY, FL 34668 US	
Current Mailing Address:	New Mailing Address:
PO BOX 1029 NEW PORT RICHEY, FL 346561029	
FEI Number: 59-2152502 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
VINCENT JAMES F. 5124 MILLER BAYOU DR PORT RICHEY, FL 34668 US	
The above named entity submits this statement for the in the State of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered A	gent Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

(X) Change () Addition

PSTD

VINCENT, JAMES F

PORT RICHEY, FL

5124 MILLER BAYOU DR

Title: PSTD Title: () Delete VINCENT, JAMES F Name: Name: 5124 MILLER BAUOU DR Address: Address: City-St-Zip: PORT RICHEY, FL City-St-Zip:

Title: () Delete Title: () Change () Addition

VINCENT, MICHAEL J Name: Name: Address: 30 CYPRESS DRIVE Address: PALM HARBOR, FL 34684 City-St-Zip: City-St-Zip:

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: JAMES F VINCENT **PSTD** 04/30/2007