

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F96000002872

FILED  
Apr 21, 2003  
Secretary of State

Entity Name: PHARMACEUTICAL SUPPORT SERVICES, INC.

## Current Principal Place of Business:

14665 ROTHGEB DRIVE  
ROCKVILLE, MD 20850 US

## New Principal Place of Business:

## Current Mailing Address:

ATTN: GLENETTE E BABB  
ONE POST, STREET SUITE 2950  
SAN FRANCISCO, CA 94104 US

## New Mailing Address:

ATTN: GLENETTE E BABB  
ONE POST, STREET SUITE 3425  
SAN FRANCISCO, CA 94104 US

FEI Number: 94-3244674

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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: PD ( ) Delete  
Name: PFAU, MARGARET M  
Address: 9700 N 91ST STREET, SUITE 232  
City-St-Zip: SCOTTSDALE, AZ 85258 US

Title: V ( ) Delete  
Name: ZAKOUR, RICHARD A  
Address: 14665 ROTHGEB DRIVE  
City-St-Zip: ROCKVILLE, MD 20850 US

Title: VTD ( ) Delete  
Name: LOIACONO, NICHOLAS A  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104 US

Title: VSD ( ) Delete  
Name: VEACO, KRISTINA  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104 US

Title: AS ( ) Delete  
Name: BABB, GLENETTE E  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104 US

Title: AS ( ) Delete  
Name: KATZER, ANDREW G  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: PFAU, MARGARET M  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104 US

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

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

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

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

Title: AS (X) Change ( ) Addition  
Name: SHUFORD, ANNE J  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GLENETTE E. BABB

AS

04/21/2003

Electronic Signature of Signing Officer or Director

Date

WILLIAM E WAGSTAFF, AS  
ONE POST STREET  
SAN FRANCISCO, CA 94104

WILLIAM H BRENNAN, AS  
ONE POST STREET  
SAN FRANCISCO, CA 94104

SUSAN PENWAY, AS  
ONE POST STREET  
SAN FRANCISCO, CA 94104