

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002955

Entity Name: BIOSCRIP PHARMACY, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

10500 CROSSTOWN CIRCLE
SUITE 300
EDEN PRAIRIE, MN 55344 US

New Principal Place of Business:

Current Mailing Address:

10500 CROSSTOWN CIRCLE
300
EDEN PRAIRIE, MN 55344 US

New Mailing Address:

10500 CROSSTOWN CIRCLE
SUITE 300
EDEN PRAIRIE, MN 55344 US

FEI Number: 41-1841437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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: TREA () Delete
Name: ROSENBAUM, STANLEY
Address: 10500 CROSSTOWN CIRCLE, SUITE 300
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: S () Delete
Name: POSNER, BARRY A
Address: 10500 CROSSTOWN CIRCLE, SUITE 300
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: PC () Delete
Name: FRIEDMAN, RICHARD H
Address: 10500 CROSSTOWN CIRCLE, SUITE 300
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: VP () Delete
Name: BREWER, JOHN
Address: 10050 CROSSTOWN CIRCLE, SUITE 300
City-St-Zip: EDEN PRAIRIE, MN 55344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ROSENBAUM, STANLEY
Address: 100 CLEARBROOK ROAD
City-St-Zip: ELMSFORD, NY 10053

Title: EVSD (X) Change () Addition
Name: POSNER, BARRY A
Address: 100 CLEARBROOK ROAD
City-St-Zip: ELMSFORD, NY 10053

Title: PD (X) Change () Addition
Name: FRIEDMAN, RICHARD H
Address: 100 CLEARBROOK ROAD
City-St-Zip: ELMSFORD, NY 10053

Title: AS (X) Change () Addition
Name: FRANKEL, DAVID L
Address: 100 CLEARBROOK ROAD
City-St-Zip: ELMSFORD, NY 10053

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: BARRY A. POSNER

EVSD

04/28/2009

Electronic Signature of Signing Officer or Director

Date