## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED Mar 17, 2003 8:00 am Secretary of State

Daytime Phone #

DOCUMEN   # F9700006383							03-17-2003 91088 004 ***150.00		
Pharmeri	ica Drug Systems, I	nc.	:/						
DO NOT WRITE IN THIS SPACE						90054097			
	•						566J4097		
Principal Place of Business									
1300 Morris Drive 1300 Morris Dr			rive	ive					
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			CE		
City & State		City & State				-		Applied For	
Chesterbrook, PA			hesterbrook, PA Zip Country			52	-1198121	Not Applicable	
Zip	Country	1908		USA	y	, 5.	Contitionto of Status Desired 1 1	.75 Additional Required	
19087	USA DO NOT-WRITE IN T			USA		7.⇒Naı	me and Address of Current Registered A		
-	DO NO PARITE IN 1	nio o	PACE		Name				
					CT Corporation				
					Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road				
					1200 50	oucn	Pine Island Road		
	•		**					İ	
			2		City			ip Code	
	.1 . 1				Planata			33324	
8. The above	named entity submits this stateme	nt for the	purpose of changi	ng its re	gistered office	or registe	red agent, or both, in the State of Florida. I	am familiar with	
and accep	t the obligations of registered agent	٠, ,	er e sid a					3.	
	***								
SIGNATURE	<u></u>			<u> </u>		4 4 1 -:		DATE	
	Signature, typed or printed name of regis	stered ager	t and title if applicab	le. (	NOTE: Registere	a Agent si	gnature required when reinstating)	UATE	
	nuary 1 - May 1 Fee Is \$150.00 After May 1, Fee Is \$550.00			•			9. Election Campaign Financing	\$5.00 May Be	
· · ·	Amended UBR is \$61.25	-		- 1		• .	Trust Fund Contribution.	· Added to Fees -	
	Payable to Florida Department o						<u></u>		
10.	OFFICERS AND	DIRECTO	RS						
TITLE	President			ПП	l l				
NAME	Charles J. Carpent	cer	•	NAM	_			أأ	
STREET ADDRESS	1300 Morris Drive				ET ADDRESS				
CITY - ST - ZIP	Chesterbrook, PA	<u> 19087</u>	i	-	- ST - ZIP			j	
TITLE	Senior VP & CFO			TITL	l l				
NAME	David Weidner			NAM			•	`	
STREET ADDRESS	1300 Morris Drive				ET ADDRESS		**		
CITY - ST - ZIP	Chesterbrook, PA	19087		_	-ST - ZIP				
TITLE	VP & Secretary .			_TITLE		7 to 1, 1791	in the second section of the second section is a second section of the second section of the second section is a second section of the second section	<del></del>	
NAME	William D. Sprague	€		NAM	•			j	
STREET ADDRESS	1300 Morris Drive				ET ADDRESS   - ST - ZIP		DO NOT WRITE IN THIS SI	PACE	
CITY - ST - ZIP	Chesterbrook, PA			_					
TITLE	VP, General Counse	∌⊥, A	sst. Sec.	TITLE	I .			{	
NAME STREET ADDRESS	John Scheels			NAMI				{	
STREET ADDRESS	1300 Morris Drive				EET ADORESS - ST - ZIP				
CITY - ST - ZIP	Chesterbrook. PA	79087	1	_					
TITLE	Asst. Secretary		•	ПП	I .				
NAME	Daniel T. Hirst			NAMI	I .		• • •	•	
STREET ADDRESS CITY - ST - ZIP	1300 Morris Drive		,	- 1	ET ADORESS		general control of the control of th	11- 1 mes	
<del> </del>	Chesterbrook, PA	1908/			-				
NAME				TITLE			in a figure of the state of the second	Trans of the	
STREET ADDRESS	to get a comment of		1 (+45 <b>)</b> 7		ET ADDRESS		American a series and a consistence of the constant of the con		
CITY - ST - ZIP					-ST-ZIP		أأستنين بريراء بيدويوني البيد المراجي الدوجيد الاعداد عاملات		
	L					<del> </del>		1	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.									
SIGNATURE: Daniel T. Hirst 3/10/2003 610-727-7000									

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR