

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001578

FILED  
Sep 09, 2005  
Secretary of State

Entity Name: D & K HEALTHCARE RESOURCES, INC.

## Current Principal Place of Business:

8235 FORSYTH BLVD.  
10TH FLOOR  
ST LOUIS, MO 63105

## New Principal Place of Business:

## Current Mailing Address:

8235 FORSYTH BLVD.  
10TH FLOOR  
ST LOUIS, MO 63105

## New Mailing Address:

ONE POST STREET  
ATTN: GLENETTE BABB - 33RD FLOOR  
SAN FRANCISCO, CA 94104

FEI Number: 43-1465483

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILSON, MARTIN D  
Address: 8235 FORYTH BLVD  
City-St-Zip: ST LOUIS, MO

Title: SVCF ( ) Delete  
Name: HILTON, THOMAS  
Address: 8235 FORSYTH BLVD  
City-St-Zip: SAINT LOUIS, MO 63105

Title: S ( ) Delete  
Name: GIST, J. RICHARD  
Address: 8235 FORSYTH BLVD  
City-St-Zip: SAINT LOUIS, MO 63105

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: JULIAN, PAUL C  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104

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

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

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

Title: AS ( ) Change (X) Addition  
Name: HUMPHREY, JAMES M  
Address: 601 E CORPORATE DRIVE  
City-St-Zip: LEWISVILLE, TX 75057

Title: AS ( ) Change (X) Addition  
Name: WU, MELISSA  
Address: ONE POST STREET  
City-St-Zip: SAN FRANCISCO, CA 94104

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

09/09/2005

Electronic Signature of Signing Officer or Director

Date