2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
04 MAR 30 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F99000004437

1. Entity Name
FRESENIUS MEDICAL CARE PHARMACY SERVICES, INC.

Principal Place of Business	Mailing Address
95 HAYDEN AVENUE LEXINGTON, MA 02420	ATTN: TAX DEPT., 95 HAYDEN AVENUE LEXINGTON, MA 02420

DO NOT WRITE IN THIS SPACE

03152004 No Chg-P CR2E034 (10/03)

4. FEI Number
04-3480138
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LIPPS, BEN J
STREET ADDRESS	95 HAYDEN AVENUE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	SEC
NAME	KUERBITZ, RONALD
STREET ADDRESS	95 HAYDEN AVENUE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	VP
NAME	UPDYKE, DAVID
STREET ADDRESS	95 HAYDEN AVENUE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	AT
NAME	LIEBERMAN, MARC
STREET ADDRESS	95 HAYDEN AVENUE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	AT
NAME	COLANTONIO, PAUL
STREET ADDRESS	95 HAYDEN AVENUE
CITY-ST-ZIP	LEXINGTON, MA 02420
TITLE	T
NAME	FAWCETT, MARK
STREET ADDRESS	95 HAYDEN AVENUE
CITY-ST-ZIP	LEXINGTON, MA 02420

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03/31/04--01004--001 **3250.00

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: P L Lipps 3/16/04 781 402 8003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

FRESENIUS MEDICAL CARE PHARMACY SERVICES, INC.

FG900004437

FEIN 04-3480138

LIST OF OFFICERS AND DIRECTORS
EFFECTIVE 04/10/03

DIRECTORS	OFFICE	BUSINESS
BEN J. LIPPS	DIRECTOR	95 HAYDEN AVENUE LEXINGTON, MA 02420

OFFICERS	OFFICE	BUSINESS
WILLIAM NUMBERS	PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
DAVID UPDYKE	VICE PRESIDENT	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARK FAWCETT	TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
PAUL J. COLANTONIO	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
MARC S. LIEBERMAN	ASSISTANT TREASURER	95 HAYDEN AVENUE LEXINGTON, MA 02420
RONALD J. KUERBITZ	SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420
ANDREW EISMAN	ASSISTANT SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420
DOUGLAS G. KOTT	ASSISTANT SECRETARY	95 HAYDEN AVENUE LEXINGTON, MA 02420