

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H21077

FILED
Jan 26, 2010
Secretary of State

Entity Name: ROBINSON'S PHARMACY, INC.

Current Principal Place of Business:

C/O JAMES A. ROBINSON
114 E. BROADWAY
KISSIMMEE, FL 34741

New Principal Place of Business:

C/O JAMES A. ROBINSON
914 BALTIMORE DRIVE
ORLANDO, FL 32810

Current Mailing Address:

914 BALTIMORE DRIVE
ORLANDO, FL 32810 US

New Mailing Address:

C/O JAMES A. ROBINSON
914 BALTIMORE DRIVE
ORLANDO, FL 32810

FEI Number: 59-2447153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JAMES A.
114 E. BROADWAY
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

ROBINSON, JAMES A.
914 BALTIMORE DR
ORLANDO, FL 32810 US

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: JAMES A ROBINSON

01/26/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD
Name: ROBINSON, JAMES A.
Address: 914 BALTIMORE DR.
City-St-Zip: ORLANDO, FL 32810

Title: ST
Name: ROBINSON, HILDA D.
Address: 914 BALTIMORE DR.
City-St-Zip: ORLANDO, FL 32810

I hereby 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 all other like empowered.

SIGNATURE: JAMES A ROBINSON

PD

01/26/2010

Electronic Signature of Signing Officer or Director

Date