2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2010
Secretary of State

DOCUMENT# H31445

Entity Name: PARAMORE'S PHARMACY, INC.

Current Principal Place of Business:

% EARL S. PARAMORE
4314 5TH AVENUE
MARIANNA, FL 32446

New Principal Place of Business:

EARL S. PARAMORE
4314 5TH AVENUE
MARIANNA, FL 32446

Current Mailing Address:

% EARL S. PARAMORE
4314 5TH AVENUE
MARIANNA, FL 32446

New Mailing Address:

EARL S. PARAMORE
4314 5TH AVENUE
MARIANNA, FL 32446

FEI Number: 59-2478742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARAMORE, EARL S
4295 WOODBRAIR ROAD
MARIANNA, FL 32446 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: PRES
Name: PARAMORE, EARL S.
Address: 4295 WOODBRIAR ROAD
City-St-Zip: MARIANNA, FL 32446 US

Title: ST
Name: PARAMORE, DONNA M
Address: 4295 WOODBRIAR ROAD
City-St-Zip: MARIANNA, FL 32446 US

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: EARL S. PARAMORE PRES 04/22/2010

Electronic Signature of Signing Officer or Director — Date