

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H92314

Entity Name: ADAMS PHARMACY, INC.

FILED
Apr 25, 2011
Secretary of State

Current Principal Place of Business:

% J.R. ADAMS, JR.
922 OHIO AVENUE
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

% J.R. ADAMS, JR.
922 OHIO AVENUE
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 59-2625987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, J.R., JR.
922 OHIO AVENUE
LYNN HAVEN, FL 32444 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

OFFICERS AND DIRECTORS:

Title: PD
Name: ADAMS, J R JR
Address: 922 OHIO AVENUE
City-St-Zip: LYNN HAVEN, FL

Title: SD
Name: ADAMS, MARY SUE
Address: 922 OHIO AVENUE
City-St-Zip: LYNN HAVEN, FL

Title: D
Name: ADAMS, DAVID
Address: 922 OHIO AVE
City-St-Zip: LYNN HAVEN, FL

Title: D
Name: ADAMS, RAY III
Address: 922 OHIO AVE
City-St-Zip: LYNN HAVEN, FL

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: JR ADAMS, JR

PD

04/25/2011

Electronic Signature of Signing Officer or Director

Date