## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J11320

Entity Name: PITTS PHARMACY, INC.

FILED Jan 07, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2185 HWY 71 218 SOUTH HWY 71

WEWAHITCHKA, FL 32465 WEWAHITCHKA, FL 32465

**Current Mailing Address: New Mailing Address:** 

MAIN STREET POST OFFICE BOX 986 POST OFFICE BOX 986 WEWAHITCHKA, FL 32465 WEWAHITCHKA, FL 32465

FEI Number: 59-2663603 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PITTS, CHARLES A. PITTS, CHARLES A 625 STONE MILL CREEK ROAD RT. 3 BOX 236-A WEWAHITCHKA, FL 32465 US WEWAHITCHKA, FL 32465

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: 01/07/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

( ) Delete PITTS, CHARLES A Name:

625 STONE MILL CREEK ROAD Address:

City-St-Zip: WEWAHITCHKA, FL

Title:

( ) Delete Title: STD Name: PITTS, MARY A.,

625 STONE MILL CREEK ROAD Address: WEWAHITCHKA, FL 32465 City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

Name: PITTS, CHARLES A

625 STONE MILL CREEK ROAD Address: City-St-Zip: WEWAHITCHKA, FL 32465 US

Title: () Change () Addition

Name: Address: City-St-Zip:

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: CHARLES A. PITTS PD 01/07/2005