2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# J32304

Entity Name: DEAN'S DRUGS OF KEYSTONE HEIGHTS, INC.

Current Principal Place of Business:

124 LAWRENCE BLVD.
KEYSTONE HEIGHTS, FL 32656

New Principal Place of Business:

6461 BAKER ROAD
KEYSTONE HEIGHTS, FL 32656

Current Mailing Address:

P O BOX 338
KEYSTONE HGTS, FL 32656 US

New Mailing Address:

P O BOX 1569
KEYSTONE HGTS, FL 32656 US

FEI Number: 59-2715914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEAN, LAURA G.
6461 BAKER RD
KEYSTONE HGTS, FL 32656 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DST ( ) Delete
Name: DEAN, PHILIP T.,
Address: 6461 BAKER RD
City-St-Zip: KEYSTONE HGTS, FL

Title: DP ( ) Delete
Name: DEAN, LAURA G.,
Address: 6461 BAKER RD
City-St-Zip: KEYSTONE HGTS, FL

Title: D ( ) Delete
Name: DEAN, RHETT
Address: 661 LEE RD 2038
City-St-Zip: NOTASULGA, AL 36866

Title: D ( ) Delete
Name: DEAN, JUSTIN
Address: 1392 SE 21 B
City-St-Zip: MELROSE, FL 32666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LAURA G. DEAN DP 05/02/2007

Electronic Signature of Signing Officer or Director Date