

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K41820

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: INTEGRATED PHARMACY SOLUTIONS, INC.

**Current Principal Place of Business:**

2301 LUCIAN WAY  
SUITE 200  
MAITLAND FL, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

151 FARMINGTON AVENUE  
W101  
HARTFORD, CT 06156 US

**New Mailing Address:**

FEI Number: 59-2917735      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: PD ( ) Delete  
Name: LEE, EDWARD C  
Address: 151 FARMINGTON AVENUE  
City-St-Zip: HARTFORD, CT 06156

Title: VPIA ( ) Delete  
Name: BELLIZZI, JERRY J  
Address: 151 FARMINGTON AVE.  
City-St-Zip: HARTFORD, CT 06156

Title: S ( ) Delete  
Name: AFFRICANO, TONYA M  
Address: 151 FARMINGTON AVENUE  
City-St-Zip: HARTFORD, CT 06156

Title: VPT ( ) Delete  
Name: COFRANCESCO, ELAINE R  
Address: 151 FARMINGTON AVE.  
City-St-Zip: HARTFORD, CT 06156

Title: VPC ( ) Delete  
Name: WEISS, JAMES D  
Address: 980 JOLLY ROAD  
City-St-Zip: BLUE BELL, PA 19422

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPAS (X) Change ( ) Addition  
Name: BELLIZZI, JERRY J  
Address: 151 FARMINGTON AVE.  
City-St-Zip: HARTFORD, CT 06156

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

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

Title: VPC (X) Change ( ) Addition  
Name: MAHONEY, STEPHEN M  
Address: 151 FARMINGTON AVE.  
City-St-Zip: HARTFORD, CT 06156

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: EDWARD C. LEE

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

PD

04/11/2008

\_\_\_\_\_ Date