## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

## **Secretary of State** DOCUMENT #K51730 03-17-2005 90018 008 \*\*\*150.00 1. Entity Name EXPRESS PHARMACY SERVICES, INC. Principal Place of Business Mailing Address 1300 MORRIS DRIVE 1300 MORRIS DRIVE CHESTERBROOK, PA 19087 CHESTERBROOK, PA 19087 2. Principal Place of Business 3. Mailing Address 1300 Morris Drive 1300 Morris Drive Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 01102005 CR2E034 (10/03) City & State Applied For City & State 4. FEI Number Chesterbrook inesterbrook 59-2919363 Not Applicable Country USA \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE SVPS ☐ Delete ☐ Change ☐ Addition TITLE SPRAGUE, WILLIAM D NAME NAME 1300 MORRIS DRIVE STREET ADDRESS STREET ADDRESS CHESTERBROOK, PA 19087 CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Defete TITLE Director ☐ Change 🔀 Addition SHIELDS, WILLIAM G NAME NAME STREET ADDRESS 1300 MORRIS DRIVE STREET ADDRESS CHESTERBROOK, PA 19087 CITY-ST-7IP CITY-ST-7IP Director/SVP+CFO SVPC Change. - Addition TITLE Delete TITLE WEIDNER, DAVID NAME 1300 MORRIS DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHESTERBROOK, PA 19087 VP+AsstSecretary Richard M. Greenhall Delete TITLE **VPGC** TITLE Change **X** Addition NAME SCHEELS, JOHN NAME 1300 morris Drive 1300 MORRIS DRIVE STREET ADDRESS STREET ADORESS Chesterbrook PA 19087 CITY-ST-ZIP CHESTERBROOK, PA 19087 CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE AS HIRST, DANIEL T NAMÉ NAME STREET ADDRESS 1300 MORRIS DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHESTERBROOK, PA 19087 ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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FILED Mar 17, 2005 8:00 am