

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 24, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # K78376**

1. Entity Name  
**WEBSTER DRUG STORES, INC.**



Principal Place of Business  
**1508 ARTHUR AVENUE  
ORLANDO, FL 32804 US**

Mailing Address  
**1508 ARTHUR AVENUE  
ORLANDO, FL 32804 US**



01172005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2971206**

Applied For  
**Not Applicable**

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WEBMAN, EDWARD  
1508 ARTHUR AVENUE  
ORLANDO, FL 32804**

**DO NOT WRITE  
IN THIS SPACE**

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 transferring)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing **\$5.00** May Be  
Trust Fund Contribution, ☐ Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
**P**  
NAME  
**WEBMAN, MALKA B.**  
STREET ADDRESS  
**1508 ARTHUR AVE.**  
CITY-ST-ZIP  
**ORLANDO, FL**

TITLE  
**ST**  
NAME  
**WEBMAN, EDWARD M.**  
STREET ADDRESS  
**1314 GREEN COVE ROAD**  
CITY-ST-ZIP  
**WINTER PARK, FL 32789**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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01/24/05-80191-009 150.00

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**

*Malka B. Webman*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Malka B. Webman*

*1-20-05*  
Date

*407-4220106*  
Daytime Phone #