

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021978

Entity Name: PRESCRIBIT RX, LLC

FILED
Jul 07, 2005
Secretary of State

Current Principal Place of Business:

3501 S.W. 160TH AVENUE
MIRAMAR, FL 33027

New Principal Place of Business:

500 WEST MAIN STREET
LOUISVILLE, KY 40202

Current Mailing Address:

3501 S.W. 160TH AVENUE
MIRAMAR, FL 33027

New Mailing Address:

P.O. BOX 740026
LOUISVILLE, KY 40202

FEI Number: 26-0010722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LISTON, THOMAS J
Address: 500 WEST MAIN ST.
City-St-Zip: LOUISVILLE, KY 40202

Title: () Delete
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Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: MCCALLISTER, MICHAEL B
Address: 500 WEST MAIN ST.
City-St-Zip: LOUISVILLE, KY 40202

Title: SVPT () Change (X) Addition
Name: BLOEM, JAMES H
Address: 500 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: VP () Change (X) Addition
Name: BAUERNFEIND, GEORGE
Address: 500 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: D () Change (X) Addition
Name: MURRAY, JAMES E
Address: 500 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: S () Change (X) Addition
Name: LENAHA, JOAN O
Address: 500 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

Title: SVP () Change (X) Addition
Name: LISTON, THOMAS H
Address: 500 WEST MAIN STREET
City-St-Zip: LOUISVILLE, KY 40202

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GEORGE BAUERNFEIND

VP

07/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date