

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017756

FILED
Apr 06, 2011
Secretary of State

Entity Name: COMMCARE PHARMACY - WPB, LLC

Current Principal Place of Business:

1689 FORUM PLACE
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

2817 EAST OAKLAND PARK BOULEVARD
SUITE 303
FORT LAUDERDALE, FL 33306 US

New Mailing Address:

FEI Number: 20-1216403 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

REGISTERED AGENTS OF FLORIDA, LLC
100 SE SECOND ST
STE 2900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: DALE W. MORRIS, ASST. VICE PRESIDENT

04/06/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: NS3 HEALTH, LLC
Address: 2817 E OAKLAND PARK BLVD #303
City-St-Zip: FORT LAUDERDALE, FL 33306

I hereby 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: ANNA-MARIE FORREST

SEC

04/06/2011

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