2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 08, 2010
Secretary of State

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Entity Name: PHAR/MEDIC, LLC

Current Principal Place of Business:

505 CROSS CREEK CIRCLE
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

505 CROSS CREEK CIRCLE
SEBASTIAN, FL 32958

New Mailing Address:

FEI Number: 55-0870853 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHERAKO, FRANK J
505 CROSS CREEK CIRCLE
SEBASTIAN, FL 32958 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: MGRM
Name: SHERAKO, FRANK J
Address: 505 CROSS CREEK CIRCLE
City-St-Zip: SEBASTIAN, FL 32958

Title: MGRM
Name: SHERAKO, JUDY P
Address: 505 CROSS CREEK CIRCLE
City-St-Zip: SEBASTIAN, FL 32958

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 Statues.

SIGNATURE: FRANK J. SHERAKO PRES 01/08/2010

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