

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000086769

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Entity Name:** JPH PHARMACY LICENSING AND CONSULTING LLC.

**Current Principal Place of Business:**

11531 GLENMONT DR  
TAMPA, FL 33635

**New Principal Place of Business:**

**Current Mailing Address:**

11531 GLENMONT DR  
TAMPA, FL 33635

**New Mailing Address:**

**FEI Number:** 20-3448095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HAWES, JOHN P JR  
11531 GLENMONT DR  
TAMPA, FL 33635 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: CEO  
Name: HAWES, JOHN P JR  
Address: 11531 GLENMONT DR  
City-St-Zip: TAMPA, FL 33635

Title: VP  
Name: HAWES, LILIANA M  
Address: 11531 GLENMONT DR  
City-St-Zip: TAMPA, FL 33635

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: JOHN P. HAWES JR.

CEO

01/30/2011

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