

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007984

FILED
Feb 16, 2010
Secretary of State

Entity Name: SEASIDE FAMILY PHARMACY, LLC

Current Principal Place of Business:

4075 A1A SOUTH, SUITE 102
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

4075 A1A SOUTH, SUITE 102
ST. AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 03-0579462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENNINGTON, JAMES D MANAGER
115 SAN RAFAEL RD.
ST. AUGUSTINE, FL 32080 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
Name: PENNINGTON, JAMES DENNIS
Address: 4075 A1A SOUTH, SUITE 102
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR
Name: MCCARTY, DELAINE P
Address: 4112 CREEKBLUFF DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: MGR
Name: BLANCO, RYAN
Address: 117 BONITA DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: MGR
Name: MCCARTY, ANTHONY OBIE
Address: 4112 CREEKBLUFF DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

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: JAMES DENNIS PENNINGTON

MGR

02/16/2010

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