

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047229

Entity Name: OMNICARE NR, L.L.C.

FILED
Feb 03, 2009
Secretary of State

Current Principal Place of Business:

601 HERITAGE DRIVE
SUITE #: 152
JUPITER, FL 33458

New Principal Place of Business:

3535 MILITARY TRAIL
SUITE #: 206
JUPITER, FL 33458

Current Mailing Address:

601 HERITAGE DRIVE
SUITE #: 152
JUPITER, FL 33458

New Mailing Address:

3535 MILITARY TRAIL
SUITE #: 206
JUPITER, FL 33458

FEI Number: 65-1279750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARK PERLMAN, PA
1820 EAST HALLANDALE BEACH BOULEVARD
HALLANDALE BEACH, FL 33009 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: SMITH, CAROL A
Address: 601 HERITAGE DRIVE, SUITE 152
City-St-Zip: JUPITER, FL 33458

Title: MGR () Delete
Name: SMITH, JEFFREY S
Address: 601 HERITAGE DRIVE, SUITE 152
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SMITH, CAROL A
Address: 3535 MILITARY TRAIL, SUITE 206
City-St-Zip: JUPITER, FL 33458

Title: MGR (X) Change () Addition
Name: SMITH, JEFFREY S
Address: 3535 MILITARY TRAIL, SUITE 206
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JEFFREY S SMITH

CFO

02/03/2009

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