

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000115936

Entity Name: BUCKHORN PHARMACY, LLC

FILED  
Mar 12, 2009  
Secretary of State

## Current Principal Place of Business:

1085 SOPCHOPPY HWY  
SOPCHOPPY, FL 32358

## New Principal Place of Business:

1085 SOPCHOPPY HWY  
SUITE 1-A  
SOPCHOPPY, FL 32358

## Current Mailing Address:

43 GREENLIN VILLA ROAD  
CRAWFORDVILLE, FL 32327

## New Mailing Address:

FEI Number: 30-0393056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRANKLIN, HELEN  
43 GREENLIN VILLA ROAD  
CRAWFORDVILLE, FL 32327 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 ( ) Delete  
Name: BROWN, RITA  
Address: 5578 PEDRICK PLANTATION CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32317

Title: MGRM ( ) Delete  
Name: FRANKLIN, HELEN  
Address: 43 GREENLIN VILLA ROAD  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: MGRM ( ) Delete  
Name: FRANKLIN, FREDDIE  
Address: 43 GREENLIN VILLA RD.  
City-St-Zip: CRAWFORDVILLE, FL 32327

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: BARNHART, TAWANA  
Address: 1085 SOPCHOPPY HWY SUITE 1-A  
City-St-Zip: SOPCHOPPY, FL 32358

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: HELEN FRANKLIN

MGRM

03/12/2009

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