

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102060

FILED
Apr 30, 2008
Secretary of State

Entity Name: DRUG BOX, LLC

Current Principal Place of Business:

1334 CAPITAL MEDICAL BLVD.
TALLAHASSEE, FL 32308

New Principal Place of Business:

3334 CAPITAL MEDICAL BLVD.
SUITE 400
TALLAHASSEE, FL 32308

Current Mailing Address:

1334 CAPITAL MEDICAL BLVD.
TALLAHASSEE, FL 32308

New Mailing Address:

3334 CAPITAL MEDICAL BLVD.
SUITE 400
TALLAHASSEE, FL 32308

FEI Number: 26-1210858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANEY, MARK T
215 SOUTH MONROE STREET, 2ND FLOOR
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

TARDI, KELBY H CPA
3334 CAPITAL MEDICAL BLVD
SUITE 400
TALLAHASSEE, FL 32308 US

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: KELBY TARDI

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR () Change (X) Addition
Name: SHIPMAN, ROBERT M
Address: 3334 CAPITAL MEDICAL BLVD STE 400
City-St-Zip: TALLAHASSEE, FL 32308

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: KELBY H. TARDI

MRS

04/30/2008

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