

# **2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000124185

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** STAT RX USA, LLC

**Current Principal Place of Business:**

2481 HILTON DRIVE, UNIT 5  
GAINESVILLE, GA 30501

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10890  
JACKSONVILLE, FL 32247

**New Mailing Address:**

**FEI Number:** 26-1602531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH HULSEY & BUSEY, PROFESSIONAL ASSOCIA  
225 WATER STREET  
SUITE 1800  
JACKSONVILLE, FL 32202 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: VP  
Name: RIDGE, ROBERT  
Address: 2481 HILTON DRIVE, UNIT 5  
City-St-Zip: GAINESVILLE, GA 30501

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: ROBERT RIDGE

VP

03/31/2010

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