

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000000280

**Entity Name:** CARTER'S ORTEGA PHARMACY, LLC

**FILED**  
**Jan 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2923 CORINTHIAN AVENUE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

2923 CORINTHIAN AVENUE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 59-0813854

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARTER, GREGORY S  
2923 CORINTHIAN AVENUE  
JACKSONVILLE, FL 32210 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:** GREGORY SCOTT CARTER HOLDINGS, LLC  
**Address:** 2923 CORINTHIAN AVENUE  
**City-St-Zip:** JACKSONVILLE, FL 32210

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: GREGORY S CARTER

MGR

01/13/2011

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