

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000084093

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** PEPPERTREE PHARMACY, LLC

**Current Principal Place of Business:**

5854 S.E. 5TH ST  
OCALA, FL 34472

**New Principal Place of Business:**

**Current Mailing Address:**

6488 CURRIN DRIVE  
SUITE 100  
ORLANDO, FL 328355755

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

HYLTON ADAMSON WATSON & MOORE PLLC  
120 E. COLONIAL DRIVE  
ORLANDO, FL 32801 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  
Name: AYOTUNDE, MICHAEL  
Address: 6488 CURRIN DRIVE, SUITE 100  
City-St-Zip: ORLANDO, FL 328355755

Title: MGRM  
Name: AYOTUNDE, ELIZABETH  
Address: 6488 CURRIN DRIVE, SUITE 100  
City-St-Zip: ORLANDO, FL 328355755

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: ELIZABETH AYOTUNDE

MGRM

04/30/2011

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