

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000089815

FILED
Apr 26, 2011
Secretary of State

Entity Name: DERMATOLOGY DEPOT LLC

Current Principal Place of Business:

3446 FOREST HILL BOULEVARD
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

3446 FOREST HILL BOULEVARD
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAP SERVICE CORPORATION
4800 NORTH FEDERAL HIGHWAY
SUITE 307B
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

CICERONI, KIMBERLY
3446 FOREST HILL BOULEVARD
WEST PALM BEACH, FL 33406 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: KIMBERLY CICERONI

04/26/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: POSCH, SAMANTHA A
Address: 10517 WILLOW OAK COURT
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM
Name: CICERONI, KIMBERLY A
Address: 10517 WILLOW OAK COURT
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM
Name: GRIFF, CHARLES
Address: 3400 FOREST HILL BOULEVARD
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: MGRM
Name: BELUE, PATRICIA A
Address: 6571 WEST JOHNSON ROAD
City-St-Zip: LAPORTE, IN 46350 US

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: KIMBERLY CICERONI

MGRM

04/26/2011

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