

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000101943

Entity Name: BEACHES PHARMACY, LLC

FILED
Feb 10, 2012
Secretary of State

Current Principal Place of Business:

4717 SAN JUAN AVENUE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

4717 SAN JUAN AVENUE
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 27-3572371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEAN MEAD SERVICES, LLC
800 N. MAGNOLIA AVENUE, SUITE 1500
ORLANDO, FL 32803 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: MAYO, SAMUEL MASON
Address: 4320 DEERWOOD LAKE PARKWAY, SUITE 101-211
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGRM
Name: GAYNOR, BRIAN PATRICK
Address: 4320 DEERWOOD LAKE PARKWAY, SUITE 101-211
City-St-Zip: JACKSONVILLE, FL 32216

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: BRIAN GAYNOR

MGRM

02/10/2012

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