## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000224

Entity Name: SAVANNAH MONTGOMERY PHARMACY, L.L.C.

**FILED** Apr 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1495 FOREST HILL BOULEVARD, SUITE A 314 10TH STREET WEST PALM BEACH, FL 33406

SUITE 200

WEST PALM BEACH, FL 33401

**Current Mailing Address: New Mailing Address:** 

314 10TH STREET 1495 FOREST HILL BOULEVARD, SUITE A

WEST PALM BEACH, FL 33406 SUITE 200

WEST PALM BEACH, FL 33401

FEI Number: 65-0812916 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CARP, MICHAEL T CARP, MICHAEL T 1495 FOREST HILL BOULEVARD, SUITE A 314 10TH STREET

WEST PALM BEACH, FL 33406 SUITE 200

WEST PALM BEACH, FL 33401 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: MICHAEL T. CARP 04/29/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change ( ) Addition

CARP, MICHAEL T CARP, MICHAEL T Name: Name: Address: 1495 FOREST HILL BOULEVARD, SUITE A Address: 314 10TH STREET SUITE 200

City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MICHAEL T. CARP **MGRM** 04/29/2009