2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2010
Secretary of State

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Entity Name: ASSOCIATED PHARMACIES SERVICES, L.L.C.

Current Principal Place of Business:

211-B LONNIE E. CRAWFORD BLVD.
SCOTTSBORO, AL 35769

New Principal Place of Business:

211 LONNIE E. CRAWFORD BLVD.
SCOTTSBORO, AL 35769

Current Mailing Address:

211-B LONNIE E. CRAWFORD BLVD.
SCOTTSBORO, AL 35769

New Mailing Address:

211 LONNIE E. CRAWFORD BLVD.
SCOTTSBORO, AL 35769

FEI Number: 57-1183909 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: COPELAND, JON
Address: 211 LONNIE E. CRAWFORD BLVD
City-St-Zip: SCOTTSBORO, AL 35769

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 Statues.

SIGNATURE: JON COPELAND MGR 04/26/2010

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