

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mayhew  
Secretary of State  
1905 F. W. WALTERS BLDG.  
TALLAHASSEE, FL 32304

APPROVED  
AND  
FILED

MAY - 1 1995 9:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **M98617**

(7)

1. Corporation Name

**WEST FLORIDA PHARMACIES, INC.**

Principal Office or Offices: **1612 N Pace Blvd. Pensacola, FL 32505**  
 Mailed Address: **1612 N Pace Blvd. Pensacola, FL 32505**

DO NOT WRITE IN THIS SPACE

2. Principal Office or Offices	2a. Mailed Address	3. Date first reported as existing	3a. Date of Last Report
21 1612 N. Pace Blvd.	26 1612 N. Pace Blvd.	09/14/1988	04/18/1994
22	27	4. FET Number	Applied For / Not Applicable
23 Pensacola, FL	28 Pensacola, FL	59-2911883	
24 32505	25 Escambia	5. Certificate of Status Desired	\$8.75 Additional Fee Required
29 32505	30 Escambia	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		8. This corporation has liability for interest for under 5 199.032 Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CLAYTON, R. C. 435 LUVERNE AVE PANAMA CITY 92491		1612 N. Pace Blvd.	
1612 N. Pace Blvd. Pensacola, FL 32505		Pensacola, FL 32505	

11. Pursuant to the provisions of Sections 601.0403 and 197.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office or registered agent as both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the provisions of Section 601.0403, Florida Statutes.

SIGNATURE: *R.C. Clayton* Date: 4/28/95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICES TO OFFICERS AND DIRECTORS	
OFFICER	NAME	OFFICE	NAME
PD	CLAYTON, R. C. 1604 N. PACE BLVD. PENSACOLA FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	1612 N. Pace Blvd. Pensacola, FL 32505
D	FORTUNE, EDMUND M. 4029 HIGHWAY 90 PACE FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
D	CLAYTON, GERRY 912 DESAMA AVE PANAMA CITY FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	P.O. Box 302 Panama City, FL 32402
D	PARMER, DONALD R 435 LUVERNE AVE PANAMA CITY FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	P.O. Box 47 Panama City, FL 32402
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that I am qualified for the description stated in law hereon. I declare under penalty of perjury that the information indicated on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made in person. That I am an officer or director of the corporation or the officer or director empowered to execute this report as required by Chapter 443, Florida Statutes, and that my name appears on Block 1 of Block 1 of the filing or on an attachment with an address.

SIGNATURE: *R.C. Clayton*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**R. C. CLAYTON**

4/28/95 (904) 435-8313

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**APPROVED AND FILED**

09/16/1988 10:05

FILED IN THE OFFICE OF THE CLERK OF THE SUPREME COURT, FLORIDA



CORPORATION  
ANNUAL REPORT  
1995

FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam,  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **M98885** (0)  
SEA GYPSY FLORIDA KEYS, INC.

Principal Place of Business: **121 POINT PLEASANT KEY LARGO FL 33037**  
Mailing Address: **121 POINT PLEASANT KEY LARGO FL 33037**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Organized: **09/16/1988** 38. Date of Last Report: **05/01/1994**

2. Principal Place of Business: 21. Mailing Address  
22. State: 27. State: **FL**  
23. City: 28. City & State  
24. County: 29. County: **DADE** 30. City: **KEY LARGO**

4. FEI Number: **65-0076620** Applied For:  Not Applicable:   
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
7. This corporation has authority for integrated tax under its Florida Statutes:  Yes  No

**9. Name and Address of Current Registered Agent** **10. Name and Address of New Registered Agent**

**GIBBS, BRADFORD R.**  
**121 POINT PLEASANT**  
**KEY LARGO FL 33037**

B1 Name: \_\_\_\_\_  
B2 Street Address: \_\_\_\_\_  
B3 \_\_\_\_\_  
B4 City: \_\_\_\_\_ FL B5 Zip Code: \_\_\_\_\_

11. Pursuant to the provisions of Sections 607, 608, and 609, Florida Statutes, the abovesigned corporation certifies this statement for the purpose of changing its registered office and registered agent in both the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am not a natural person as defined in Section 607, Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN:	
1. NAME	DPS GIBBS, BRADFORD R. 121 POINT PLEASANT KEY LARGO FL	1. NAME	DP GIBBS, BRADFORD R. 121 POINT PLEASANT DR KEY LARGO, FL. 33037
2. NAME	T GIBBS, BRADFORD R. 121 POINT PLEASANT KEY LARGO FL	2. NAME	TS GIBBS, PATRICIA L 121 POINT PLEASANT DR KEY LARGO, FL. 33037
3. NAME		3. NAME	
4. NAME		4. NAME	
5. NAME		5. NAME	
6. NAME		6. NAME	
7. NAME		7. NAME	
8. NAME		8. NAME	
9. NAME		9. NAME	
10. NAME		10. NAME	
11. NAME		11. NAME	
12. NAME		12. NAME	
13. NAME		13. NAME	
14. NAME		14. NAME	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and disclosed equally for the exemption stated in Section 607, Florida Statutes. Further, I certify that the information submitted on this annual report or supplementary annual report is true and accurate and that my corporation shall have the same legal effect as if made under oath. It is my privilege as director of this corporation or the officer or shareholder who prepared to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, only as authorized with \_\_\_\_\_

SIGNATURE: *Bradford R. Gibbs*  
SIGNATURE AND TYPED OR PRINTED NAME OF DOMESTIC OFFICER OR DIRECTOR

2/6/95 315-457-1070