## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

	REINSTA							
	MENT # N04000002			FILE				
1. Enjly Name FLORIDA COMMUNITY PHARMACY SOCIETY, INC.				06	-	ु ६: ६)		
Principal Place of Business 4133 UNIVERSITY BLVD S #1 JACKSONVILLE, FL 32216		Mailing Address 4133 UNIVERSITY BLVD JACKSONVILLE, FL 3221		TA TA	EORL) LLAHASSE.	AGIAO 14		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03102006 REI	MUP II IS II V CR2E	099 (11/05)	3-06	
City & State		City & State		4. FEI Number			plied For	
Zip	Country	Zip	Country	5. Certificate of Sta	itus Desired	\$8.75 Add		
	6. Name and Address of Current F	Registered Agent		7. Name and Addr	ess of New Registere	d Agent		
				Name				
JAFFRY, EDWARD S 106 E COLLEGE AVE SUITE 1200			Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
TALLAHASSEE, FL 32301								
			City		F	L Zip Code	9	
8. 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. I am familiar with, and accept the obligations of registered agent.								
tile ooligati	ions of registered agent.	0) -			- 1 1			
SIGNATURE JULIAN 3/16/06								
			<del>/</del>				l	
	Signature, typed or printed name of registered agent a	nd title & applicable. UNDTE:	Registered Agent signat	ure required when reinstating)	DATE			
	Signature, typed or printed name of registered agent a	nd like 4 apptitudes. // UNDTE:	Registered Agent signat	ure required when reinstaling)	DATE Make che	ck payable to	1	
FIL	LE NOWIII FEE IS \$297.50				Make che Florida Dep	ck payable to artment of St	ate	
	LE NOWIII FEE IS \$297.50  OFFICERS AND DIR		11.	ADDITIONS/CHANGE	Make che Florida Dep S TO OFFICERS AND	ck payable to artment of St	ate	
FIL  10.  TITLE  NAME  STREET ADDRESS	Director Bob Fishman 4401 Sheridan St.	ECTORS Delete	11. TITLE NAME	ADDITIONS/CHANGE Director Bob Rowland	Make che Florida Dep S TO OFFICERS AND	ck payable to artment of St	10	
FIL  10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND DIR Director Bob Fishman 4401 Sheridan St. Hollywad FL 35	ECTORS  Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Yo Deland FL	Make che Florida Dep S TO OFFICERS AND	eck payable to artment of St DIRECTORS IN	10 Addition	
FIL  10.  TITLE  NAME  STREET ADDRESS	OFFICERS AND DIR Director Bob Fishman 4401 Sheridan St. Hollywad FL 35 Director	ECTORS  Delete  3021  Delete	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	ADDITIONS/CHANGE Director Bob Rowlana 112 E. New Y Deland FL Director	Make che Florida Dep S TO OFFICERS AND Ork Are. 32724	cck payable to artment of St DIRECTORS IN Change	10	
FIL  10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Director Hollywad FL 33 Director John Noriega 202E. Brandon B	ECTORS  Delete  3021  Delete	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	ADDITIONS/CHANGE Director Bob Rowlana 112 E. New Y Deland FL Director Bob Hoye 3215 S. Muca	Make che Florida Dep S TO OFFICERS AND  Ork Are. 32724	cck payable to artment of St DIRECTORS IN Change	10 Addition	
FIL  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE	OFFICERS AND DIR  Director Bob Fishman 4401 Sheridan St. Hollywad FL 35 Director John Noriega 202 E. Brandon B Brandon FL 33	ECTORS Delete 2.3021 Delete 3.511	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y Deland FL Director Bob Hoye 3215 S. Muca Tampa FL 3 Director	Make che Florida Dep S TO OFFICERS AND Ork Arc. 32724  1:11 Arc. Su 33629	cck payable to artment of St DIRECTORS IN Change	10 Addition	
FIL  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE	OFFICERS AND DIR  Director Bob Fishman 4401 Sheridan St. Hollywad FL 35 Director John Noriega 202 E. Brandon B Brandon FL 33	ECTORS Delete 2.3021 Delete 3.511	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 32155. Muca Tampa FL 3 Director Director	Make che Florida Dep S TO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 23629	cck payable to artment of St DIRECTORS IN Change	10 Addition	
FIL  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE	OFFICERS AND DIR  Director Bob Fishman 4401 Sheridan St. Hollywad FL 35 Director John Noriega 202 E. Brandon B Brandon FL 33	ECTORS Delete 2.3021 Delete 3.511	11.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y Deland FL Director 3215 S. Maca Tampa FL 3 Director Dean Stidhan 224 E. Inte	Make che Florida Dep S TO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 3629  1-lake Blire	cck payable to artment of St DIRECTORS IN Change	10 Addition	
FIL  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP THE	Director John Noriega Brandon FL 33 Director John Noriega Brandon FL 33 Director John Moriega Brandon FL 33 Director Lynn Massey 306 E. Jefferson Quincy FL 3233	ECTORS Delete 2.3021 Delete 3.511	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215 S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Intel Lake Placid	Make che Florida Dep S TO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 3629  1-lake Blire	cck payable to artment of St DIRECTORS IN Change	10 Addition	
FIL  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	Director John Noriega Director John Noriega Director John Noriega Director John Mansey Joze Brandon B Brandon FL 33 Director Lynn Massey 306 E. Jefferson Quincy FL 3235 Director Dee Ann Mullins	ECTORS  Delete  3021  Delete  1vd. 511  Delete  5f.	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Intel Lake Placid Director	Make che Florida Dep S TO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 3629  1-lake Blue 1 FL 338.	ck payable to artment of St DIRECTORS IN Change Change Change	10 Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Director John Noriega Director John Noriega Director John Noriega Director John Mansey Director John Massey John M	Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215 S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Intel Lake Placid	Make che Florida Dep S TO OFFICERS AND Ork Are. 32724  1:11 Are. Su 3629  1 lake Blue of FL 338.	ck payable to artment of St DIRECTORS IN Change	10 Addition Addition	
FIL  10.  IIILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	Director  John Noriega  Director  John Noriega  Brandon FL 33  Director  John Massey  John Massey  John FL 33  Director  John Massey  John FL 33  Director  John Mullins  Brandon FL 33  Director  John Mullins  Brandon FL 32  Director  Director  Dee Ann Mullins  Brandon FL 32  Director	Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215 S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Inter Lake Placia Director Steve Nelson 203 SW Pari OKeechobee	Make che Florida Dep STO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 3629  1-lake Blue 4 FL 338.  K St. FL 3497	Ck payable to artment of St DIRECTORS IN Change Change Change Change	10 Addition Addition	
FIL  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	Director Lenowiii FEE IS \$297.50  OFFICERS AND DIR Director Bob Fishman 4401 Sheridan St. Hollywood FL 33 Director John Noriega 202E Brandon B Brandon FL 33 Director Lynn Massey 306 E. Jefferson Quincy FL 3230 Director Dee Ann Mullins 830 Ohio Ave. Lynn Haven FL 32 Director Bill Napier	Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	ADDITIONS/CHANGED Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215 S. Maca Tampa FL 3 Director Dean Stidhan 224 E. Intel Lake Placid Director Steve Nelson 203 SW Pari OKeechobee Director Steve Aessm 1100 NW 122	Make che Florida Dep STO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 3629  1 lake Blue 4 FL 338.  5 St. FL 3497  and Terrace	ck payable to artment of St DIRECTORS IN Change  Change  Change  Change  Change  Change	Addition  Addition  Addition	
FIL  10.  IIILE NAME STREET ADDRESS CITY-S1-ZIP  TITLE NAME TREET ADDRESS CITY-S1-ZIP  TITLE	Director  John Noriega  Director  John Noriega  Brandon FL 33  Director  John Massey  John Massey  John FL 33  Director  John Massey  John FL 33  Director  John Mullins  Brandon FL 33  Director  John Mullins  Brandon FL 32  Director  Director  Dee Ann Mullins  Brandon FL 32  Director	Delete     Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director 3215 S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Intel Lake Placid Director Steve Nelson 203 SW Pari Okeechobee	Make che Florida Dep STO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 3629  1 lake Blue 4 FL 338.  5 St. FL 3497  and Terrace	ck payable to artment of St DIRECTORS IN Change  Change  Change  Change  Change  Change	Addition  Addition  Addition	
FIL  10.  IIILE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	Director  John Noriega  Director  John Noriega  Brandon FL 33  Director  John Massey  306 E. Jefferson  Quincy FL 3230  Director  Director  Director  Lynn Massey  306 E. Jefferson  Quincy FL 3230  Director  Ann Mullins  830 Onio Ave.  Lynn Haven FL 32  Director  Bill Napier  7302 N. Main St.	Delete     Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215 S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Inter Lake Placid Director Steve Nelson 203 SW Pari Okeechobee Director Steve Pressm 1700 NW 122 Pembroke Pir	Make che Florida Dep S TO OFFICERS AND FORK AVE. 32724  1:11 AVE. Su 3629  7-lake Blue 4 FL 338.  K St. FL 3497  and Terrace pas FL 33.	ck payable to artment of St DIRECTORS IN Change Change Change Change Change Change Change	Addition  Addition  Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Director  Bob Fishman  4401 Sheridan St.  Hollywood FL 33  Director  John Noriega  202 E. Brandon B  Brandon FL 33  Director  Lynn Massey  306 E. Jefferson  Quincy FL 3230  Director  Director  Dee Ann Mullins  830 Onio Ave.  Lynn Haven FL 32  Director  Bill Napier  7302 N. Main St.  Jacksonville FL  Director	Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215 S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Inter Lake Placid Director Steve Nelson 203 SW Pari Okeechobee Director Steve Pressm 1700 NW 122 Pembroke Pir	Make che Florida Dep S TO OFFICERS AND FORK AVE. 32724  1:11 AVE. Su 3629  7-lake Blue 4 FL 338.  K St. FL 3497  and Terrace pas FL 33.	ck payable to artment of St DIRECTORS IN Change Change Change Change Change Change Change	ate  10 Addition Addition Addition Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIR  Director Bob Fishman 4401 Sheridan St. Holly Wad FL 35 Director John Noriega 202 E. Brandon B Brandon FL 33 Director Lynn Massey 306 E. Jefferson Quincy FL 3230 Director Dee Ann Mullins 830 Ohio Ave. Lynn Haven FL 32 Director Bill Napier 7302 N. Main St. Jacksonville FL	ECTORS   Delete	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE	ADDITIONS/CHANGE Director Bob Rowland 112 E. New Y. Deland FL Director Bob Hoye 3215 S. Muca Tampa FL 3 Director Dean Stidhan 224 E. Inter Lake Placid Director Steve Nelson 203 SW Pari Okeechobee Director Steve Pressm 1700 NW 122 Pembroke Pir	Make che Florida Dep STO OFFICERS AND  Ork Are. 32724  1:11 Are. Su 3629  1 lake Blue 4 FL 338.  5 St. FL 3497  and Terrace	ck payable to artment of St DIRECTORS IN Change Change Change Change Change Change Change	ate  10 Addition Addition Addition Addition Addition	

12. I nereby certify that the information supplied with this fling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Semant Massay 3.15.2006 850.627.7595

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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