2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2012
Secretary of State

DOCUMENT# N11000004850

Entity Name: PALM BEACH SOCIETY OF HEALTH-SYSTEM PHARMACISTS, INC

Current Principal Place of Business:

5287 GRANDE PALM CIRCLE
DELRAY BEACH, FL 33484

New Principal Place of Business:

2409 WESTMONT DR
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

5287 GRANDE PALM CIRCLE
DELRAY BEACH, FL 33484

New Mailing Address:

2409 WESTMONT DR
ROYAL PALM BEACH, FL 33411

FEI Number: 26-1680335 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NUNEZ, MANUEL
2409 WESTMONT DRIVE
ROYAL PALM BEACH, FL 33411 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

OFFICERS AND DIRECTORS:

Title: P
Name: LESE, MICHELLE
Address: P O BOX 2283
City-St-Zip: PALM BEACH, FL 33480

Title: T
Name: NUNEZ, MANUEL
Address: 2409 WESTMONT DR
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: S
Name: ULRICH, STUART
Address: 1811 BANYAN CREEK CIRCLE N
City-St-Zip: DELRAY BEACH, FL 33436

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHELLE LESE P 03/21/2012
Electronic Signature of Signing Officer or Director Date