

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001572

FILED
Apr 30, 2010
Secretary of State

Entity Name: HILLSBOROUGH COUNTY PHARMACY ASSOCIATION, INC.

Current Principal Place of Business:

4422 PORPOISE DRIVE
TAMPA, FL 33617 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15296
TAMPA, FL 336845296 US

New Mailing Address:

P.O. BOX 290344
TAMPA, FL 33687 US

FEI Number: 59-3239180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRELL, BRUCE
4422 PORPOISE DR
TAMPA, FL 336178316 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: D
Name: STRELL, BRUCE
Address: 4422 PORPOISE DRIVE
City-St-Zip: TAMPA, FL 33617

Title: D
Name: BOBO, BOB
Address: 232 E DAVIS BLVD.
City-St-Zip: TAMPA, FL 33606

Title: D
Name: STACHOWICK, CHARLES
Address: 12410 MOONDRAGON DR
City-St-Zip: TAMPA, FL 33617

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: BRUCE STRELL

DIR

04/30/2010

Electronic Signature of Signing Officer or Director

Date