

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000002765

FILED  
Mar 03, 2009  
Secretary of State

Entity Name: STARCOR PHARMACEUTICALS, INC.

## Current Principal Place of Business:

2500 SW 17TH RD  
BLDG 100  
OCALA, FL 34474 US

## Current Mailing Address:

2500 SW 17TH RD  
BLDG 100  
OCALA, FL 34474 US

## New Principal Place of Business:

2500 SW 17TH RD  
BLDG 100  
OCALA, FL 34471 US

## New Mailing Address:

2500 SW 17TH RD  
BLDG 100  
OCALA, FL 34471 US

FEI Number: 59-3618320

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOCKE, D. RUSSELL  
2500 S.W. 17TH ROAD, BLDG. 100  
OCALA, FL 34471 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PPTS ( ) Delete  
Name: LOCKE, D. RUSSELL  
Address: 2500 S.W. 17TH ROAD, BLDG. 100  
City-St-Zip: OCALA, FL 34471

Title: DR ( ) Delete  
Name: LOCKE, D. RUSSELL  
Address: 2500 S.W. 17TH ROAD, BLDG. 100  
City-St-Zip: OCALA, FL 34471

Title: D (X) Delete  
Name: KLIMBERG, IRA W  
Address: 3201 SW 34TH ST  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LOCKE, D. RUSSELL  
Address: 2500 S.W. 17TH ROAD, BLDG. 100  
City-St-Zip: OCALA, FL 34471

Title: VSTD (X) Change ( ) Addition  
Name: KLIMBERG, IRA W  
Address: 2500 S.W. 17TH ROAD, BLDG. 100  
City-St-Zip: OCALA, FL 34471

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: D RUSSELL LOCKE, MD

PD

03/03/2009

Electronic Signature of Signing Officer or Director

Date