

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007494

FILED  
Feb 05, 2009  
Secretary of State

Entity Name: VERACITY PHARMACEUTICALS, INC.

**Current Principal Place of Business:**

3550 NW 126TH AVENUE  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

3550 NW 126TH AVENUE  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 65-0976379      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ELEFANT, FRED  
1650 PRUDENTIAL DRIVE  
SUITE 105  
JACKSONVILLE, FL 32207 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: D      ( ) Delete  
Name: KRAEMER, MARK  
Address: 2651 FOREST CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32257

Title: D      ( ) Delete  
Name: EDWARDS, ROBERT J JR  
Address: 7341 WEST CYPRESS HEAD DRIVE  
City-St-Zip: PARKLAND, FL 33067

Title: D      ( ) Delete  
Name: WESTON, STEVEN  
Address: 6289 NW 62ND TERRACE  
City-St-Zip: PARKLAND, FL 33067

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: ROBERT J EDWARDS JR

CEO

02/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date