## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000072045

FILED Mar 11, 2008 Secretary of State

Entity Name: NEW PHARMACEUTICAL STRATEGIES, INC.	
Current Principal Place of Business:	New Principal Place of Business:
824 ADONIS PLACE VENICE, FL 34292	137 HILL ST. HOLLISTON, MA 01746
Current Mailing Address:	New Mailing Address:
824 ADONIS PLACE VENICE, FL 34292	137 HILL ST. HOLLISTON, MA 01746
FEI Number: 65-1033025 FEI Number Applied For ( ) FEI Nu	umber Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
COOK, HORACE C 824 ADONIS PLACE VENICE, FL 34292 US	
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:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: CEO () Delete Name: GAFFNEY, JOHN G Address: 1304 KINGS GRANT DRIVE City-St-Zip: RALEIGH, NC 27614	Title: CEO (X) Change ( ) Addition Name: ERHARDT, DEAN Address: 120 TENNESSEE WALKER WAY City-St-Zip: ST. PETERS, MO 63376

COO () Delete COOK, HORACE C Name: Address: 824 ADONIS PLACE VENICE, FL 34292 City-St-Zip:

Title: ( ) Delete

Name: Address: City-St-Zip: Title: CHRM (X) Change ( ) Addition FLEAHMAN, BRAD Name:

Address: 2414 N. PLANTANGEN RD. SW

BEMIDJI, MN MN City-St-Zip:

Title: CFO ( ) Change (X) Addition

Name: DONAHUE, TIM Address: 137 HILL ST.

City-St-Zip: HOLLISTON, MA 01746

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: TIM DONOHUE **CFO** 03/11/2008