

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079298

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** AXIUM HEALTHCARE WHOLESAL DRUGS AND MEDICAL, INC.

**Current Principal Place of Business:**

550 TECHNOLOGY PARK  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

550 TECHNOLOGY PARK  
LAKE MARY, FL 32746

**New Mailing Address:**

**FEI Number:** 59-3684167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MONTGOMERY, MARK C  
550 TECHNOLOGY PARK  
LAKE MARY, FL 32746 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: TREA ( ) Delete  
Name: GERAGHTY, JULIE S  
Address: 386 CYPRESS KNEE LANE  
City-St-Zip: LAKE MARY, FL 32746

Title: PRES ( ) Delete  
Name: MONTGOMERY, MARK C  
Address: 1325 ROTUNDA POINT #321  
City-St-Zip: LAKE MARY, FL 32746

Title: VP ( ) Delete  
Name: VAUGHN, GREGORY J  
Address: 23223 OAK CLUSTER DRIVE  
City-St-Zip: SORRENTO, FL 32776

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

Title: DIRE ( ) Change (X) Addition  
Name: SCHWAB, NELSON III  
Address: 201 NORTH TRYON STREET, SUITE 2450  
City-St-Zip: CHARLOTTE, NC 28202 US

Title: DIRE ( ) Change (X) Addition  
Name: GRIGG, CHARLES  
Address: 201 NORTH TRYON STREET, SUITE 2450  
City-St-Zip: CHARLOTTE, NC 28202 US

Title: DIRE ( ) Change (X) Addition  
Name: BURKE, FRED P  
Address: 1776 PEACHTREE ROAD NW, SUITE 310 SOUTH  
City-St-Zip: ATLANTA, GA 30309 US

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:** JULIE S GERAGHTY

TREA

04/22/2009

Electronic Signature of Signing Officer or Director

Date