2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091491

FILED
Apr 05, 2006
Secretary of State

Entity Name: COLLABORATIVE PHARMACY SYSTEMS, INC.

Current Principal Place of Business:

129 SOUTH COMMERCE AVE
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

PO BOX 4173
SEBRING, FL 33871

New Mailing Address:

FEI Number: 65-1041677 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAMES F MCCOLLUM PA
129 SOUTH COMMERCE AVE
SEBRING, FL 33870 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:	HENDRICKS, GUY III
Address:	1523 HYACINTH AVE
City-St-Zip:	SEBRING, FL 33872

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D (X) Change ( ) Addition
Name:	HENDRICKS, GUY III
Address:	1073 HYACINTH AVE
City-St-Zip:	SEBRING, FL 33875 US

I hereby certify that the information supplied with this filing does not qualify for the 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: GUY HENDRICKS III D 04/05/2006
Electronic Signature of Signing Officer or Director Date