

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2001 8:00 am
Secretary of State
 05-30-2001 90025 028 ***150.00

0295574

DOCUMENT # P00000091891

1. Entity Name
SCRIPTRX, INC.

Principal Place of Business
**148 SUNSET BAY DRIVE
 PALM BEACH GARDENS FL 33418**

Mailing Address
**148 SUNSET BAY DRIVE
 PALM BEACH GARDENS FL 33418**

File change



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
809 N. Dixie Hwy

3. Mailing Address

Suite, Apt. #, etc.
200

Suite, Apt. #, etc.

City & State
West Palm Beach FL

City & State

Zip
33401

Country

Zip

Country

4. FEI Number
52-2271639

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOT Registered Agent's signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Doug Wheeler 711 NE 4th Street Delray Beach, FL 33483	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO. LARRY LABOSSIER 148 Sunset Bay Dr PBO. FL 33418	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CMO Doug Smith 1010 Bucidos Rd Delray Beach FL 33483	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO JOHN CARVER 224 N Clearwater Dr Irving TX 75063	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Victor Cook 140 PAMELA LANE W.P. BOOTH, FL 33405	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Bobby Nicholson 148 Hampton Ridge Road Palm Beach Gardens FL 33418	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director AL Willett 1833 218TH PLACE NE SAMMAMISH, WA 98074	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director MARK McGOWAN Deutscher Ast. Hghst, 130 Liberty St NY, NY 10006	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE: OR DIRECTOR

Date

Daytime Phone #

Doug Smith, MD **5/21/01** **361-662-0172**

CR2E034 (10/00)



Empowering Physicians Through Technology

Attachment
D#P000000091891
A0071621

May 21, 2001

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

We are a new company, incorporated on January 1, 2001, supported by venture capital and scrambling to develop and market our product before the monies run out.

We apologize for not filing by the May 1 deadline; the address of 148 Sunset Bay belongs to a member of our board of directors. He is retired and spends most of his time traveling. We used his address because we thought it would serve as a permanent location for important documents, but did not expect his absence to mean our not meeting deadlines. We are currently changing our address to our permanent office location at 809 N. Dixie Highway, West Palm Beach.

Enclosed is the check for \$150 for the filing fee, which we hope will satisfy our obligation. The addition late fee of \$400 is really a hardship for us at this time. I assure you in the future that we will file this report as soon as it comes in to us.

What we are trying to accomplish at ScriptRx is to provide a machine to Hospitals and Doctor's offices that will produce accurate, easily read prescriptions. We have had moderate success and struggle forward.

Thanks so much for your cooperation.

With sincere appreciation,

A handwritten signature in black ink, appearing to read "Doug Smith", written over a horizontal line.

Doug Smith, M.D.
Medical Director