

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000048343

FILED
Jan 10, 2012
Secretary of State

Entity Name: CRESTVIEW PHARMACY, INC.

Current Principal Place of Business:

1116 N. FERDON BLVD.
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

296 S. FERDON BLVD.
STE. 25
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 59-3718091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITELL, LISA Y
4 ELEVENTH AVE., STE. 1
SHALIMAR, FL 32579 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

OFFICERS AND DIRECTORS:

Title: D
Name: LIVINGSTON, MELVIN D JR
Address: 5925 PINEFOREST DR
City-St-Zip: CRESTVIEW, FL 32539

Title: D
Name: HENDERSON, BRYAN
Address: 3084 WHITLEY OAKS LN
City-St-Zip: PACE, FL 32571

Title: D
Name: DENSMAN, HAL J
Address: 1224 CUDDLE DOON AVE
City-St-Zip: MILTON, FL 32583

Title: D
Name: SPREIER, MITCHELL P
Address: 1472 THE CROSSINGS
City-St-Zip: NICEVILLE, FL 32578

I hereby 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 all other like empowered.

SIGNATURE: BRYAN D HENDERSON

D

01/10/2012

Electronic Signature of Signing Officer or Director

_____ Date