

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078568

FILED
Jan 07, 2004
Secretary of State

Entity Name: PHARMACY INVESTMENT COORDINATORS (PIC, INC.)

Current Principal Place of Business:

3206 S WESTSHORE BLVD
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

3206 S WESTSHORE BLVD
TAMPA, FL 33629

New Mailing Address:

P.O. BOX 547
ALBANY, GA 31702

FEI Number: 59-3737369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WURSTER, KEN
3206 S WESTSHORE BLVD
TAMPA, FL 33629 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: P () Delete
Name: SHARPE, FRED F
Address: P.O.BOX 547
City-St-Zip: ALBANY, GA 31702

Title: S () Delete
Name: WURSTER, KEN
Address: 3206 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: SCOTT, LONDON
Address: 3206 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: STRICKLAND, MIKE
Address: 3206 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: COTTRELL, DANIEL
Address: 3206 S WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33629

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRED F. SHARPE

PRES

01/07/2004

Electronic Signature of Signing Officer or Director

Date