

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067972

Entity Name: MAYO FAMILY PHARMACY, INC.

FILED
Apr 11, 2008
Secretary of State

Current Principal Place of Business:

294 W. MAIN STREET
SUITE 1
MAYO, FL 32066 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 405
MAYO, FL 32066 US

New Mailing Address:

FEI Number: 01-0719990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCALL, TOMMY L
1214 BRECKENRIDGE RUN
TALAHASSEE, FL 32311 US

Name and Address of New Registered Agent:

RILEY, IRA JR
344 SW LAKE ST
MAYO, FL 32066 US

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: IRA RILEY JR

04/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RILEY, IRA
Address: 7400 POWERS AVE., APT. 297
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE (X) Change () Addition
Name: BLAKE, SHATARA L
Address: 344 SW LAKE ST
City-St-Zip: MAYO, FL 32066 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: SHATARA L BLAKE

DIRE

04/11/2008

Electronic Signature of Signing Officer or Director

Date