## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 28, 2003 8:00 am Secretary of State

Daytime Phone #

DOCUMENT # P02000114357  1. Entity Name						04-28-2003 91301 050 ***150.00			
RxFirst, Inc.									
IXI IIGC,	, 1110.								
DO NOT WRITE IN THIS SPACE									
	<u></u>				_	11024101			
2. Principal Place of Business 3. Mailing Address 174 Kelsey Lane 1300 Morris			-	rive					
Suite, Apt. #, etc. Suite, Apt. #, etc.						DO NOT WRITE IN THIS SPACE			
City & State City &			& State			4. FEI Number Applied For			
Tampa, I	FL Country	Chest Zip	erbrook, Pi	<u>untry</u>	04-	-3722897	\$0.75	Not Applicable Additional	
33619	USA	19087	us:	•		Certificate of Status Desired	Fee Re	quired	
	DO NOT WRITE IN T	HIS SP	ACE	Name		me and Address of Current Registe	red Agent	<u>t</u>	
				Mertz, V	Mertz, William L.				
				Street Address (P.O. Box Number is Not Acceptable) 175 Kelsey Lane					
			•						
				City Tampa		Fl	Zip C - 336		
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. Lam familiar with,									
	of the obligations of registered agent			• .	1.			e project	
SIGNATURE	· · · · · · · · · · · · · · · · · · ·	·		ACT De la		1164 11 1 1 1	,	<u> </u>	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE  January 1 - May 1 Fee is \$150.00									
	,		Selection Campaign Financing     Trust Fund Contribution.	~~~	\$5.00 May Be Added to Fees				
Make Check 10.	Amended UBR is \$61.25 Payable to Florida Department of OFFICERS AND		·						
TITLE	President	DINECTOR		TITLE					
NAME STREET ADDRESS	William G. Sheilds			NAME : STREET ADDRESS				(1)	
CITY - ST - ZIP	1300 Morris Drive Chesterbrook, PA	19087		CITY - ST - ZIP				F034R (12/02	
TITLE	Senior VP & CFO			ME			_	CR2	
NAME STREET ADDRESS	Davis A. Weidner 1300 Morris Drive			NAME STREET ADDRESS					
CITY - ST - ZIP	Chesterbrook, PA			DITY - ST - ZIP		<del></del>			
TITLE NAME	VP & Asst. Secreta	ary ==	•	NTLE		in the second of			
STREET ADDRESS	1300 Morris Drive			STREET ADDRESS CITY - ST - ZIP  DO NOT WRITE IN THIS SPACE				<u></u>	
CITY - ST - ZIP	Chesterbrook, PA : Sr. VP & Secretary			OTY - ST - ZIP	<u>L</u>	JO NOT WRITE IN THE	5 5PA	CE	
NAME	William D. Sprague			AME				}	
STREET ADDRESS CITY - ST - ZIP	1300 Morris Drive Chesterbrook, PA 1	9087		STREET ADDRESS					
TITLE	Asst. Secretary	2001		NTLE					
NAME STREET ADDRESS	Daniel T. Hirst 1300 Morris Drive			NAME STREET ADDRESS				1	
CITY - ST - ZIP	Chesterbrook, PA	19087		CITY - ST - ZIP					
TITLE NAME		٠	L L	TITLE AME	-		•	_ ]	
STREET ADDRESS		,	<b>,</b>	STREET ADDRESS					
CITY - ST - ZIP	<u> Proposition de la compania del compania del compania de la compania del compania del compania de la compania del c</u>			YTY_ST_ZIP			<del></del>		
12. 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 10 or on an attachment with an address, with all other like empowered.									
SIGNATURE: Daniel T. Hirst 4/17/2003 610-727-7000									
	SIGNATURE AND TYPED O	R PRINTED I					me Phone #		