

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000054100

FILED  
Jan 06, 2006  
Secretary of State

Entity Name: ENGLEWOOD SPECIALTY PHARMACY, INC.

## Current Principal Place of Business:

2800 PLACIDA ROAD, STE 116B  
ENGLEWOOD, FL 34224

## New Principal Place of Business:

21234 OLEAN BLVD.  
SUITE 6  
PORT CHARLOTTE, FL 33952

## Current Mailing Address:

2800 PLACIDA ROAD, STE 116 B  
ENGLEWOOD, FL 34224

## New Mailing Address:

4087 LACOSTA ISLAND CT.  
PUNTA GORDA, FL 33950

FEI Number: 56-2352979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARRIS, DANIEL  
4087 LACOSTA ISLAND CT.  
PUNTA GORDA, FL 33950 US

## Name and Address of New Registered Agent:

FARRIS, DANIEL E PTD  
4087 LACOSTA ISLAND CT.  
PUNTA GORDA, FL 33950 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: DANIEL E FARRIS

01/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: FARRIS, DANIEL  
Address: 4087 LACOSTA ISLAND CT.  
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VSD ( ) Delete  
Name: RICE, ROBERT J  
Address: 189 FAIRWAY ROAD  
City-St-Zip: ROTONDA WEST, FL 33947

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: FARRIS, DANIEL E PTD  
Address: 4087 LACOSTA ISLAND CT.  
City-St-Zip: PUNTA GORDA, FL 33950 US

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 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: DANIEL E FARRIS

PTD

01/06/2006

Electronic Signature of Signing Officer or Director

Date