

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000047701

Entity Name: RX CONNECTION PHARMACY, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

2332 PINE RIDGE ROAD
NAPLES, FL 34109

New Principal Place of Business:

4277 EXCHANGE AVE
SUITE #5
NAPLES, FL 34104

Current Mailing Address:

2332 PINE RIDGE ROAD
NAPLES, FL 34109

New Mailing Address:

724 MAY AVE
N. FT. MYERS, FL 33903

FEI Number: 83-0370488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHUMANN, RAYMOND L
27200 RIVERVIEW CENTER BLVD.
SUITE 103
BONITA SPRINGS, FL 34134 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, D () Delete
Name: FISHER, ADAM
Address: 1413 SE 23RD PLACE
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, D (X) Change () Addition
Name: FISHER, NICOLE
Address: 724 MAY AVE
City-St-Zip: N. FT. MYERS, FL 33903

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: NICOLE FISHER

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date