

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114736

FILED
May 09, 2007
Secretary of State

Entity Name: MEDICATION MANAGEMENT SERVICES, P.A.

Current Principal Place of Business:

8044 DESOTO WOODS DRIVE
SARASOTA, FL 34243

New Principal Place of Business:

2443 DESOTO ROAD
SARASOTA, FL 34234

Current Mailing Address:

8044 DESOTO WOODS DRIVE
SARASOTA, FL 34243

New Mailing Address:

2443 DESOTO ROAD
SARASOTA, FL 34234

FEI Number: 57-1213456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESIDENTIAL SERVICES INCORPORATED
1217 CAPE CORAL PKWY
CAPE CORAL, FL 33904 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHAMBERS, HOWARD N
Address: 8044 DESOTO WOODS DR
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CHAMBERS, HOWARD N
Address: 2443 DESOTO ROAD
City-St-Zip: SARASOTA, FL 34234

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: HOWARD CHAMBERS

D

05/09/2007

Electronic Signature of Signing Officer or Director

Date