

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120570

Entity Name: SUNSHINE PHARMACY MEDICAL, INC.

FILED
Jan 21, 2008
Secretary of State

Current Principal Place of Business:

6350 DAVIS BLVD.
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

6350 DAVIS BLVD.
NAPLES, FL 34104

New Mailing Address:

FEI Number: 20-1540763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PARRISH, DELMER H
390 HAWSER LN
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

PARRISH, DELMER H
5482 RATTLESNAKE HAMMOCK RD.
NAPLES, FL 34113 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:

01/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PARRISH, DEL H
Address: 390 HAWSER LN
City-St-Zip: NAPLES, FL 34102

Title: VP () Delete
Name: PARRISH, RENEE E
Address: 390 HAWSER LN
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARRISH, DEL H
Address: 5482 RATTLESNAKE HAMMOCK RD.
City-St-Zip: NAPLES, FL 34113

Title: VP (X) Change () Addition
Name: PARRISH, RENEE E
Address: 5482 RATTLESNAKE HAMMOCK RD
City-St-Zip: NAPLES, FL 34113

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: DEL PARRISH

P

01/21/2008

Electronic Signature of Signing Officer or Director

Date