

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093730

FILED
Apr 16, 2009
Secretary of State

Entity Name: LANE AVENUE PHARMACY, INCORPORATED

Current Principal Place of Business:

2595 WATERMILL DRIVE
ORANGE PARK, FL 32073 US

New Principal Place of Business:

1233-9 LANE AVENUE SOUTH
JACKSONVILLE, FL 32205 US

Current Mailing Address:

2595 WATERMILL DRIVE
ORANGE PARK, FL 32073 US

New Mailing Address:

FEI Number: 26-0757826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HIGH END INCOME TAX & ACCTG SRVCS
4200 NW 16 STREET
SUITE 600-A
LAUDERHILL, FL 33313 US

Name and Address of New Registered Agent:

OBASUYI, OGHOGHO
2595 WATERMILL DRIVE
ORANGE PARK, FL 32073 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: OGHOGHO OBASUYI

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: OBASUYI, OGHOGHO
Address: 2595 WATERMILL DRIVE
City-St-Zip: ORANGE PARK, FL 32073 US

Title: VCOO () Delete
Name: OSAIYUWU, RICHARD
Address: 17753 NW 47TH ST
City-St-Zip: MIRAMAR, FL 33029 US

Title: SCFO () Delete
Name: UHUNMWANGHO, EGHOSA
Address: 4495 SW 179 WAY
City-St-Zip: MIRAMAR, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: OGHOGHO OBASUYI

PCOE

04/16/2009

Electronic Signature of Signing Officer or Director

Date