

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000124158

FILED
Apr 20, 2012
Secretary of State

Entity Name: PERFORMANCE PHARMACY SYSTEMS, INC.

Current Principal Place of Business:

12000 CAPRI CIRCLE S #4
TREASURE ISLAND, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

12000 CAPRI CIRCLE S #4
TREASURE ISLAND, FL 33706 US

New Mailing Address:

FEI Number: 32-0222194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRONIN, MICHAEL T ESQ
911 CHESTNUT STREET
CLEARWATER, FL 33756 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

OFFICERS AND DIRECTORS:

Title: PD
Name: MORRILL, THOMAS S
Address: 12000 CAPRI CIRCLE S #4
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: ST
Name: BAILIFF, SHARON
Address: 12000 CAPRI CIRCLE S #4
City-St-Zip: TREASURE ISLAND, FL 33706 US

I hereby 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 all other like empowered.

SIGNATURE: SHARON BAILIFF

S

04/20/2012

Electronic Signature of Signing Officer or Director

_____ Date