2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State
05-04-2004 90155 037 ***150.00

DOCUMENT # P07284

1. Entity Name
INSTA-CARE PHARMACY SERVICES CORPORATION

Principal Place of Business	Mailing Address
1300 MORRIS DRIVE CAHRTER BROOK, PA 19087-5594 US	1300 MORRIS DRIVE CAHRTER BROOK, PA 19087-5594 US

04272004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
1300 Morris Drive	1300 Morris Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Chesterbrook, PA	Chesterbrook, PA
Zip 19087 Country USA	Zip 19087 Country USA

4. FEI Number 59-1817412 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CARPENTER, CHARLES 1300 MORRIS DRIVE CHESTERBROOK, PA 19087	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	William G. Shields	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT WEIDNER, DAVID 1300 MORRIS DRIVE CHESTERBROOK, PA 19087	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP & CFO	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS SPRAGUE, WILLIAM D 1300 MORRIS DRIVE CHESTERBROOK, PA 19087	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP + Secretary	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS SCHEELS, JOHN 1300 MORRIS DRIVE CHESTERBROOK, PA 19087	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP, General Counsel & Assistant Secretary	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HIRST, DANIEL T 1300 MORRIS DRIVE CHESTERBROOK, PA 19087	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant Secretary	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel T. Hirst Daniel T. Hirst 4/29/2004 610 727-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

7003 3110 0006 3378 1478