

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000100577

FILED  
Apr 22, 2009  
Secretary of State

Entity Name: DANIELS PHARMA GROUP, INC.

## Current Principal Place of Business:

5100 S CLEVELAND AVE STE 318-360  
FORT MYERS, FL 33907

## New Principal Place of Business:

## Current Mailing Address:

5100 S CLEVELAND AVE STE 318-360  
FORT MYERS, FL 33907

## New Mailing Address:

FEI Number: 26-3643901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DANIELS, RHETT S  
5365 CHIPPENDALE CIRCLE  
FORT MYERS, FL 33919 US

## Name and Address of New Registered Agent:

DANIELS, RHETT S  
5352 CHIPPENDALE CIRCLE  
FORT MYERS, FL 33919 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: RHETT S. DANIELS

04/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DANIELS, RHETT S  
Address: 5365 CHIPPENDALE CIRCLE  
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete  
Name: TREZZAS, ELIZABETH A  
Address: 5365 CHIPPENDALE CIRCLE  
City-St-Zip: FORT MYERS, FL 33919

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DANIELS, RHETT S  
Address: 5352 CHIPPENDALE CIRCLE  
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Change ( ) Addition  
Name: TREZZAS, ELIZABETH A  
Address: 5352 CHIPPENDALE CIRCLE  
City-St-Zip: FORT MYERS, FL 33919

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: RHETT DANIELS

MR

04/22/2009

Electronic Signature of Signing Officer or Director

Date