

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000027616

Entity Name: AMERASOURCE, INC

**FILED**  
**Jan 13, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

19321-C US HWY 19 NORTH  
SUITE 605  
CLEARWATER, FL 33764

## **New Principal Place of Business:**

## **Current Mailing Address:**

19321-C US HWY 19 NORTH  
SUITE 605  
CLEARWATER, FL 33764

## **New Mailing Address:**

FEI Number: 27-2227131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

MEEHAN, PATRICK  
19321-C US HWY 19 NORTH  
SUITE 605  
CLEARWATER, FL 33764 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: P  
Name: MEEHAN, PATRICK  
Address: 19321-C US HWY NORTH SUITE 605  
City-St-Zip: CLEARWATER,, FL 33764

Title: VP  
Name: BREINER, MARK  
Address: 19321-C US HWY 19 NORTH SUITE 605  
City-St-Zip: CLEARWATER,, FL 33764

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: MARK BREINER

VP

01/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date