

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000032853

Entity Name: IN-TOWN PHARMACY INC.

**FILED**  
**Jan 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1381 S. POWERLINE RD.  
POMPANO BEACH, FL 33069 US

**New Principal Place of Business:**

**Current Mailing Address:**

1381 S. POWERLINE RD.  
POMPANO BEACH, FL 33069 US

**New Mailing Address:**

FEI Number: 27-2370397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TURTURO, FRANK J II  
10604 NW 48TH STREET  
CORAL SPRINGS, FL 33076 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: PRES  
Name: TURTURO, FRANK J II  
Address: 10604 NW 48TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: VP  
Name: CANELLA, ANNA MARIE  
Address: 2800 FIORE WAY #101  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: DIR  
Name: COVINO, MARY ANN  
Address: 2800 FIORE WAY #101  
City-St-Zip: DELRAY BEACH, FL 33445 FL

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: FRANK J TURTURO II

PRES

01/03/2011

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

\_\_\_\_\_  
Date