

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15939

Entity Name: OPTION CARE, INC.

FILED  
Jan 19, 2009  
Secretary of State

## Current Principal Place of Business:

485 HALF DAY ROAD  
SUITE 300  
BUFFALO GROVE, IL 600896548 US

## New Principal Place of Business:

## Current Mailing Address:

485 HALF DAY ROAD  
SUITE 300  
BUFFALO GROVE, IL 600896548 US

## New Mailing Address:

FEI Number: 68-0017853

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BLAYLOCK, SANLEY  
Address: 1411 LAKECOOK RD. 4N  
City-St-Zip: DEERFIELD, IL 60015

Title: D ( ) Delete  
Name: RESNICK, ALLAN  
Address: 1411 LAKE COOK RD. 4N  
City-St-Zip: DEERFIELD, IL 60015

Title: D ( ) Delete  
Name: ZIMMERMAN, ROBERT  
Address: 1411 LAKE COOK RD. 4N  
City-St-Zip: DEERFIELD, IL 60015

Title: P ( ) Delete  
Name: HASHAPA, PAUL  
Address: 485 HALF DAY RD., SUITE 300  
City-St-Zip: DEERFIELD, IL 60015

Title: S ( ) Delete  
Name: BONACCORSI, JOSEPH  
Address: 485 HALF BAY RD, SUITE 300  
City-St-Zip: BUFFALO GROVE, IL 60089

Title: VP ( ) Delete  
Name: ZSITEK, LORI  
Address: 485 HALF BAY RD. SUITE 300  
City-St-Zip: BUFFALO GROVE, IL 60015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: BLAYLOCK, STANLEY  
Address: 1411 LAKECOOK RD. 4N  
City-St-Zip: DEERFIELD, IL 60015

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: MASTRAPA, PAUL  
Address: 485 HALF DAY RD., SUITE 300  
City-St-Zip: DEERFIELD, IL 60015

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSEPH BONACCORSI

SEC

01/19/2009

Electronic Signature of Signing Officer or Director

Date