

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR 23 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P30128 (3)

1. Corporation Name
ECKERD HOLDINGS II, INC.

Principal Place of Business
8333 BRYAN DAIRY ROAD
LARGO FL 34647

Mailing Address
8333 BRYAN DAIRY ROAD
LARGO FL 34647

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
07/11/1990

3a. Date of Last Report
03/01/1994

4. FEI Number
59-3014874

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

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 90 CORP. TAX DEPT.
Suite, Apt. #, etc.
22 8333 BRYAN DAIRY RD
City & State
23 LARGO, FL.
Zip
24 34647

2a. Mailing Address
26 90 CORP. TAX DEPT.
Suite, Apt. #, etc.
27 8333 BRYAN DAIRY RD.
City & State
28 LARGO, FL
Zip
29 34647

9. Name and Address of Current Registered Agent

SANTO, JAMES M.
833 BRYAN DAIRY ROAD
LARGO FL 34647

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
TURLEY, STEWART
8333 BRYAN DAIRY RD.
LARGO FL

2. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SV
BOYLE, JOHN W.
8333 BRYAN DAIRY ROAD
LARGO FL

3. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
WRIGHT, SAMUEL L.
8333 BRYAN DAIRY RD.
LARGO FL

4. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VPT
WHIDDON, THOAMS
8333 BRYAN DAIRY RD.
LARGO FL

5. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SV
ROBERSON, RICHARD W.
8333 BRYAN DAIRY ROAD
LARGO FL

6. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

V
MYERS, ROBERT L.
8333 BRYAN DAIRY ROAD
LARGO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 holder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changes from an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MICHAEL D. MEISTER

3/13/95 8:13/399-6337