

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90005 023 ***150.00

DOCUMENT # P30128

1. Corporation Name
ECKERD HOLDINGS II, INC.

Principal Place of Business

% CORP TAX DEPT
8333 BRYAN DAIRY RD
LARGO FL 34647
US

Mailing Address

% CORP TAX DEPT
8333 BRYAN DAIRY RD
LARGO FL 34647
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1990

4. FEI Number

59-3014874

Applied For

Not Applicable

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 owes the current year intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

75301-1205

30

9. Name and Address of Current Registered Agent

HENRICKS, LINDA
8333 BRYAN DAIRY RD
ATTN RISK MANAGMENT
LARGO FL 33777

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE AT ☐ DELETE

NAME MILAM, DENNIS J
STREET ADDRESS 8333 BRYAN DAIRY RD.
CITY-ST-ZIP LARGO FL

TITLE DVS ☐ DELETE

NAME SANTO, JAMES M.
STREET ADDRESS 8333 BRYAN DAIRY ROAD
CITY-ST-ZIP LARGO FL

TITLE DVL ☐ DELETE

NAME WRIGHT, SAMUEL L
STREET ADDRESS 8333 BRYAN DAIRY RD.
CITY-ST-ZIP LARGO FL

TITLE VPT ☐ DELETE

NAME GLADYSZ, MARTIN W.
STREET ADDRESS 8333 BRYA DAIRY RD.
CITY-ST-ZIP LARGO FL

TITLE DPCE ☐ DELETE

NAME NEWMAN, FRANK A.
STREET ADDRESS 8333 BRYAN DAIRY ROAD
CITY-ST-ZIP LARGO FL

TITLE VAS ☒ DELETE

NAME LEWIS, ROBERT E.
STREET ADDRESS 8333 BRYAN DAIRY ROAD
CITY-ST-ZIP 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

AS
Menard, N.J.
8333 Bryon Daing Road
Largo, FL 34647

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert E. Lewis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 1999

Date

(727) 395-6000

Daytime Phone #

CR2E034 (11/98)

0422592