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Mar 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P36816

(7)

1. Corporation Name  
DURR DRUG COMPANY, INC.

Principal Place of Business  
301 BROWN SPRINGS ROAD  
MONTGOMERY AL 36117  
US

Mailing Address  
P.O. BOX 244008  
MONTGOMERY AL 36124-4008  
US



3. Date Incorporated or Qualified 12/26/1991  
3a. Date of Last Report 02/27/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 P.O. BOX 5915

63-1053561

22 City & State

27 Att: Tax Dept

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23 Zip

Country

28 Orange, CA

Zip

Country

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24

25

29 92868

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 firm in, with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature to be printed name of registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	ASD	<input type="checkbox"/> DELETE
NAME	SAWDEI, MILAN A.	
STREET ADDRESS	4000 METROPOLITAN DRIVE	
CITY-ST-ZIP	ORANGE CA	
TITLE	VPT	<input type="checkbox"/> DELETE
NAME	SCHMITT, ERIC J	
STREET ADDRESS	4000 METROPOLITAN DRIVE	
CITY-ST-ZIP	ORANGE CA	
TITLE	CFOP	<input type="checkbox"/> DELETE
NAME	DIMICK, NEIL F.	
STREET ADDRESS	4000 METROPOLITAN DRIVE	
CITY-ST-ZIP	ORANGE CA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DIMICK, NEIL F.	
STREET ADDRESS	4000 METROPOLITAN DRIVE	
CITY-ST-ZIP	ORANGE CA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

SIGNATURE: Eric J. Schmitt, VP Finance, Treas.

2-18-97

714 385-8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)