2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000051193

Entity Name: PREMIER PHARMACY OF JACKSONVILLE, INC.

FILED Feb 12, 2009 Secretary of State

27 E 7TH ST

JACKSONVILLE, FL 32206

150 EAST 8TH STREET

JACKSONVILLE, FL 32206

JACKSONVILLE, FL 32206

Current Mailing Address: New Mailing Address:

27 E 7TH ST 150 EAST 8TH STREET JACKSONVILLE, FL 32206 JACKSONVILLE, FL 32206

FEI Number: 59-3451949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BATEH, JOHNNY M
27 E 7TH ST
JACKSONVILLE, FL 32206 US

BATEH, JOHNNY M
150 EAST 8TH STREET
JACKSONVILLE, FL 32206 US

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: 02/12/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MCENTEE, SUSAN K MCENTEE, SUSAN K Name: Name: 27 E 7TH ST 150 EAST 8TH STREET Address: Address: JACKSONVILLE, FL 32206 City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 BATEH, JOHNNY M
 Name:
 BATEH, JOHNNY M

 Address:
 27 E 7TH ST
 Address:
 150 EAST 8TH STREET

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:
 JACKSONVILLE, FL 32206

Title: D () Delete Title: D (X) Change () Addition

 Name:
 BATEH, DAVID M
 Name:
 BATEH, DAVID M

 Address:
 27 E 7TH ST
 Address:
 150 EAST 8TH STREET

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:
 JACKSONVILLE, FL 32206

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: JOHNNY M BATEH PRES 02/12/2009