

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S02978

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** BROOKSVILLE DRUGS, INC.

**Current Principal Place of Business:**

80 PONCE DE LEON BLVD  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

80 PONCE DE LEON BLVD  
BROOKSVILLE, FL 34601

**New Mailing Address:**

**FEI Number:** 59-3026478

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOODRUFF, KEN  
801 S. BROAD ST  
BROOKSVILLE, FL 34601 US

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

PATEL, ALPESH M  
80 PONCE DE LEON BLVD  
BROOKSVILLE, FL 34601 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: ALPESH PATEL

03/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PATEL, ALPESH M  
Address: 80 PONCE DE LEON BLVD  
City-St-Zip: BROOKSVILLE, FL 34601

Title: VP  
Name: PATEL, MANISH  
Address: 80 PONCE DE LEON BLVD  
City-St-Zip: BROOKSVILLE, FL 34601

I hereby 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 all other like empowered.

SIGNATURE: ALPESH PATEL

P

03/22/2011

Electronic Signature of Signing Officer or Director

Date