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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # S69796 (8)

1. Corporation Name

PRESCRIPTION MANAGEMENT SERVICES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -7 PM 3:10

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
3611 QUEEN PALM DRIVE 3611 QUEEN PALM DRIVE
TAMPA FL 33619 TAMPA FL 33619

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 25 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Country 30

3. Date Incorporated or Qualified 07/31/1991 3a. Date of Last Report 04/21/1994
4. FEI Number 59-3151567 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
REDMOND, DAVID L
3611 QUEEN PALM DRIVE
TAMPA FL 33619

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 reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	3611 QUEEN PALM DRIVE	1.2 NAME	
CITY - ST - ZIP	TAMPA FL	1.3 STREET ADDRESS	
TITLE	NAME	1.4 CITY - ST - ZIP	
STREET ADDRESS	3611 QUEEN PALM DRIVE	2.1 TITLE	☐ Change ☐ Addition
CITY - ST - ZIP	TAMPA FL	2.2 NAME	
TITLE	NAME	2.3 STREET ADDRESS	
STREET ADDRESS	3611 QUEEN PALM DR	2.4 CITY - ST - ZIP	
CITY - ST - ZIP	TAMPA FL	3.1 TITLE	☐ Change ☐ Addition
TITLE	NAME	3.2 NAME	
STREET ADDRESS	3611 QUEEN PALM DR	3.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL	3.4 CITY - ST - ZIP	
TITLE	NAME	4.1 TITLE	☐ Change ☐ Addition
STREET ADDRESS	3611 QUEEN PALM DR	4.2 NAME	
CITY - ST - ZIP	TAMPA FL	4.3 STREET ADDRESS	
TITLE	NAME	4.4 CITY - ST - ZIP	
STREET ADDRESS	3611 QUEEN PALM DR	5.1 TITLE	☐ Change ☐ Addition
CITY - ST - ZIP	TAMPA FL	5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	
STREET ADDRESS	3611 QUEEN PALM DR	5.4 CITY - ST - ZIP	
CITY - ST - ZIP	TAMPA FL	6.1 TITLE	☐ Change ☐ Addition
TITLE	NAME	6.2 NAME	
STREET ADDRESS	3611 QUEEN PALM DR	6.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL	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(8)(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 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: [Signature] 1/13/95 813/626-7788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESCRIPTION MANAGEMENT SERVICES, INC.
F.E.I. #59-3151567

STATEMENT ATTACHED TO AND MADE PART OF
CORPORATION ANNUAL REPORT
1995

OFFICERS AND DIRECTORS CONTINUED:

TITLE: D
NAME: CAMPBELL, DAVID N.
ADDRESS: 3611 QUEEN PALM DRIVE
CITY-ST-ZIP: TAMPA, FL 33619

TITLE: D
NAME: HOLT, W. SEYMOUR
ADDRESS: 3611 QUEEN PALM DRIVE
CITY-ST-ZIP: TAMPA, FL 33619

TITLE: D
NAME: PRUITT, PETER T.
ADDRESS: 3611 QUEEN PALM DRIVE
CITY-ST-ZIP: TAMPA, FL 33619