

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S81697

FILED
Apr 23, 2007
Secretary of State

Entity Name: PRIORITY HEALTHCARE PHARMACY, INC.

Current Principal Place of Business:

13900 RIVER PORT DR
MARYLAND HEIGHTS, MO 63043

New Principal Place of Business:

13900 RIVERPORT DRIVE
MARYLAND HEIGHTS, MO 63043

Current Mailing Address:

13900 RIVER PORT DR
MARYLAND HEIGHTS, MO 63043

New Mailing Address:

13900 RIVER PORT DRIVE
MARYLAND HEIGHTS, MO 63043

FEI Number: 59-3099905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEFFE, DOMENIC
Address: 13900 RIVERPORT DR
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: VP () Delete
Name: HOWAR, DONALD
Address: 13900 RIVERPORT DR
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: S () Delete
Name: EBLING, KEITH
Address: 13900 RIVERPORT DR
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: T () Delete
Name: STIFTEN, ED
Address: 13900 RIVERPORT DR
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: AS (X) Delete
Name: DILEO, ANTHONY R
Address: 13900 RIVERPORT DR
City-St-Zip: MARYLAND HEIGHTS, MO 63043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LOWENBERG, DAVID
Address: 6272 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

Title: VP (X) Change () Addition
Name: HOWARD, DONALD
Address: 6272 LEE VISTA BLVD
City-St-Zip: ORLANDO, FL 32822

Title: ASEC (X) Change () Addition
Name: ELLIOTT, KELLEY
Address: 13900 RIVERPORT DRIVE
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: ASEC (X) Change () Addition
Name: AKINS, MARTIN P
Address: 13900 RIVERPORT DRIVE
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLEY ELLIOTT

ASEC

04/23/2007

Electronic Signature of Signing Officer or Director

_____ Date