

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90030 029 ***150.00

0604219

DOCUMENT # S84661

1. Entity Name
COMPSCRIPT-BOCA, INC.

Principal Place of Business
 1225 BROKEN SOUND PARKWAY NW. SUITE A
 BOCA RATON FL 33487

Mailing Address
 C/O OMNICORE, INC.
 1717 DIXIE PKWY, STE #800
 FT WRIGHT KY 41011
 US

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0286244** Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
 Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KAHAN, BRIAN A.		NAME		
STREET ADDRESS	20975 PINAR TRAIL		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33433		CITY-ST-ZIP		
TITLE	T.	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ABBOTT, BRADLEY S		NAME		
STREET ADDRESS	635 MEADOW WOODS DR.		STREET ADDRESS		
CITY-ST-ZIP	CRESCENT SPRINGS KY 41017		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GARDNER, ROBERT J		NAME		
STREET ADDRESS	910 MCCLEARY ST		STREET ADDRESS		
CITY-ST-ZIP	DEL RAY BCH FL 33483		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FINN, TRACEY L		NAME		
STREET ADDRESS	1000 HATCH ST		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI OH 45202		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GREANY, CATHERINE I		NAME		
STREET ADDRESS	3203 GOLDEN AVE, APT #504		STREET ADDRESS		
CITY-ST-ZIP	CINCINNATI OH 45226		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ABBOTT, BRADLEY S		NAME		
STREET ADDRESS	635 MEADOW WOOD DR		STREET ADDRESS		
CITY-ST-ZIP	CRESCENT SPRINGS KY 41017		CITY-ST-ZIP		

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bradley S. Abbott **Bradley S. Abbott, Treasurer** 4/5/2001 859-426-3069
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Attachment Doc. # S 84666.1

CompScript - Boca, Inc.

538722

Robert J. Gardener, President
910 McCleary Street
Del Ray Beach, Florida 33483
562-17-5955

Brian A. Kahan, Vice President
20975 Pintar Trail
Boca Raton, Florida 33433
048-36-8145

Bradley S. Abbott, Treasurer
635 Meadow Wood Drive
Crescent Springs, Kentucky 41017
405-11-3933

List of Directors

Tracy Finn
1000 Hatch
Cincinnati, Ohio 45202
336-42-3235

Bradley S. Abbott
635 Meadow Wood Drive
Crescent Springs, Kentucky 41017
405-11-3933

Catherine I. Greany
3203 Golden Avenue, Apt. 504
Cincinnati, Ohio 45226
199-48-7953