

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000049739

**Entity Name:** ENSLEY PHARMACY, INC.

**Current Principal Place of Business:**

8814 NORTH PALAFOX STREET  
SUITE C  
PENSACOLA, FL 32434-3029

**Current Mailing Address:**

8814 NORTH PALAFOX STREET  
SUITE C  
PENSACOLA, FL 32434-3029 US

**FEI Number:** 59-3654558

**Certificate of Status Desired:** No

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

MCDONALD, PRESTON E  
8814 PALAFOX HWY STE C  
PENSACOLA, FL 32534 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: PRESTON E. MCDONALD

02/02/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, VP, S, T  
Name MCDONALD, PRESTON E  
Address 8814 PALAFOX HWY  
SUITE 3  
City-State-Zip: PENSACOLA FL 32534

*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: PRESTON E MCDONALD

P

02/02/2015

Electronic Signature of Signing Officer/Director Detail

Date