

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000079604

Entity Name: FOUNTAIN PHARMACY, INC.

Current Principal Place of Business:

1331 W BROADWAY ST
OVIEDO, FL 32765

Current Mailing Address:

1331 W BROADWAY ST
OVIEDO, FL 32765 US

FEI Number: 81-4054956

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ALALADE, OLUROTIMI
1331 W BROADWAY ST
OVIEDO, FL 32765 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name ALALADE, OLUROTIMI
Address 1331 W BROADWAY ST
City-State-Zip: OVIEDO FL 32765

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: ALALADE, OLUROTIMI

DIRECTOR

03/15/2017

Electronic Signature of Signing Officer/Director Detail

Date