

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030832

Entity Name: FCS PHARMACY, LLC

Current Principal Place of Business:

3420 FAIRLANE FARMS ROAD
SUITE 200
WELLINGTON, FL 33414

Current Mailing Address:

PO BOX 273369
BOCA RATON, FL 33427 US

FEI Number: 02-0652799

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCMILLEN, WILLIAM
22107 MARTELLA AVE
BOCA RATON, FL 33433 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

Authorized Person(s) Detail :

Title CEO
Name SHAPIRO, COLLEEN STACY
Address PO BOX 273369
City-State-Zip: BOCA RATON FL 33427

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: COLLEEN STACY SHAPIRO

CEO

04/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date