2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2016
Secretary of State
CC3589432881

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Entity Name: COMMCARE PHARMACY - WPB, LLC

Current Principal Place of Business:

1689 FORUM PLACE
WEST PALM BEACH, FL 33401

Current Mailing Address:

13034 BALLANTYNE CORPORATE PLACE
CHARLOTTE, NC 28277 US

FEI Number: 65-1188311

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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	MANAGER	Title	MANAGER
Name	GILBERT, DURRAL	Name	MCKASSON, CRAIG
Address	13034 BALLANTYNE CORPORATE PLACE	Address	13034 BALLANTYNE CORPORATE PLACE
City-State-Zip:	CHARLOTTE NC 28277	City-State-Zip:	CHARLOTTE NC 28277

Title	MANAGER
Name	PRICE, KELLI
Address	13034 BALLANTYNE CORPORATE PLACE
City-State-Zip:	CHARLOTTE NC 28277

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: CRAIG MCKASSON MANAGER 01/12/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date