

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000096223

Entity Name: AGEVITAL PHARMACY, LLC

Current Principal Place of Business:

16 S. BLVD OF THE PRESIDENTS
SARASOTA, FL 34236

Current Mailing Address:

16 S. BLVD OF THE PRESIDENTS
SARASOTA, FL 34236

FEI Number: 46-0649252

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILKINS, JENNY P
8019 CONSERVATORY DRIVE
SARASOTA, FL 34243 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 MGRM
Name ANDRUS, BRIAN K
Address 2149 W RIVER DR
City-State-Zip: SPANISH FORK UT 84660

Title MGRM
Name WILKINS, WILLIAM M
Address 8019 CONSERVATORY DRIVE
City-State-Zip: SARASOTA FL 34243

Title MGRM
Name WILKINS, JENNY P
Address 8019 CONSERVATORY DRIVE
City-State-Zip: SARASOTA FL 34243

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN KEOKI ANDRUS

MANAGING MEMBER

08/12/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date