

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000180460

Entity Name: ZEPHYRHILLS PHARMACY LLC

Current Principal Place of Business:

36504 PURE WATER WAY
ZEPHYRHILLS, FL 33541

Current Mailing Address:

36504 PURE WATER WAY
ZEPHYRHILLS, FL 33541 US

FEI Number: 82-2825888

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GOTTIPATI, BHAGAVAN
36504 PURE WATER WAY
ZEPHYRHILLS, FL 33541 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 AMBR
Name GOTTIPATI, BHAGAVAN
Address 36504 PURE WATER WAY
City-State-Zip: ZEPHYRHILLS FL 33541

Title AUTHORIZED MEMBER
Name GOTTIPATI, SUDHARANI
Address 36504 PURE WATER WAY
City-State-Zip: ZEPHYRHILLS FL 33541

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: BHAGAVAN GOTTIPATI

MANAGER

04/29/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date