

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000406096

Entity Name: DRAKE PHARMACY SOLUTIONS LLC

Current Principal Place of Business:

25195 HARBORVIEW ROAD
PORT CHARLOTTE, FL 33980

Current Mailing Address:

25195 HARBORVIEW ROAD
PORT CHARLOTTE, FL 33980 US

FEI Number: 87-2649426

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIELDHOUSE, DIANA L
25195 HARBORVIEW ROAD
PORT CHARLOTTE, FL 33980 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	Title	MGR
Name	FIELDHOUSE, DIANA L	Name	REEVE, DAVID
Address	25195 HARBORVIEW ROAD	Address	1908 IORNA AVE
City-State-Zip:	PORT CHARLOTTE FL 33980	City-State-Zip:	LEHIGH ACRES FL 33972

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: DIANA FIELDHOUSE

AMBR

04/15/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date