

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000000227

**Entity Name:** LYNNFIELD DRUG, INC.

**Current Principal Place of Business:**

ONE EXPRESS WAY  
SAINT LOUIS, MO 63121

**Current Mailing Address:**

ONE EXPRESS WAY  
SAINT LOUIS, MO 63121 US

**FEI Number: 04-3546044**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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

**Officer/Director Detail :**

Title DIRECTOR  
Name PHILLIPS, BRADLEY  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

Title SECRETARY  
Name BROWN, GENEVA  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT TREASURER  
Name FLEMING, MARK  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT VICE PRESIDENT  
Name HALEY, WILLIAM  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT TREASURER  
Name HART, JOANNE  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

Title TREASURER  
Name LAMBERT, SCOTT  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

Title VICE PRESIDENT  
Name MIMLITZ, JOHN  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT SECRETARY  
Name PERINI, VICTOR  
Address ONE EXPRESS WAY  
City-State-Zip: SAINT LOUIS MO 63121

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SCOTT LAMBERT**

**TREASURER**

**02/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date