

1.) CORPORATION NAME:

PSS World Medical, Inc.

DUE DATE: **8/31/2011**

SCC ID NO: **F1073842**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

NATIONAL REGISTERED AGENTS INC.

4001 North Ninth Street, Suite 227

ARLINGTON, VA 22203

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	150,000,000
PREFER	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

FL

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4345 SOUTHPOINT BLVD

CITY/ST/ZIP: JACKSONVILLE, FL 32216-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: GARY CORLESS
TITLE: PRESIDENT,CEO
ADDRESS: 4345 SOUTHPOINT BLVD
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32216-

OFFICER

DIRECTOR

NAME: DAVID D KLARNER
TITLE: VP/T
ADDRESS: 4345 SOUTHPOINT BLVD
CITY/ST/ZIP/CO: JACSKONVILLE, FL 32216-

OFFICER

DIRECTOR

NAME: JOSHUA H DERIENZIS
TITLE: SECRETARY
ADDRESS: 4345 SOUTHPOINT BLVD
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32216-

OFFICER

DIRECTOR

NAME: KEVIN ENGLISH
TITLE: CSO
ADDRESS: 4345 SOUTHPOINT BLVD
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32216-

OFFICER

DIRECTOR

NAME: JOHN F SASEN
TITLE: EVP/CMO
ADDRESS: 4345 SOUTHPOINT BLVD
CITY/ST/ZIP/CO: JACKSONVILLE, FL 32216-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JOSHUA H DERIENZIS
SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

JOSHUA H DERIENZIS,
SECRETARY
PRINTED NAME AND CORPORATE
TITLE

7/29/2011
DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.