No. <b>W 37757</b> Return to:		Due no later than Mar 31, 2010 Annual Report Form  1. Mailing Address: Correct in this box if needed.  RXAMERICA LLC MELANIE LUKER ONE CVS DRIVE LEGAL DEPT WOONSOCKET RI 02895 USA			2. Registered Agent and Address (NO PO BOX)  CT CORPORATION SYSTEM  1111 W JEFFERSON STE 530  BOISE ID 83702  USA  3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080								
RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Nai	mes and Addresses o	of at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MEMBER	CAREMARK	RX, L.L.C.	ONE CVS DRIVE		WOONSOCKET	RI	USA	02895
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE W 37757		Signature: Melanie Luker			Date: 03/18/2010			
		Name (type or print): Melanie Luker			Title: Assistant Secretary			
Processed 03/18/2010 * Electronically provided signatures are accepted as original signatures.								