



0004571323

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***ANNUAL REPORT**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$0.00

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-FILED-

File #: 0004571323

Date Filed: 1/14/2022 8:07:44 AM

Entity Name and Mailing Address:

Entity Name: OMNICARE PROPERTY MANAGEMENT, LLC
Foreign Name (name in home jurisdiction): OMNICARE PROPERTY MANAGEMENT, LLC
The file number of this entity on the records of the Idaho Secretary of State is: 0000281046
Address: MICHELLE JANVRIN
1 CVS DR
WOONSOCKET, RI 02895-6146

Entity Details:

Entity Status: Active-Existing
This entity is organized under the laws of: DELAWARE
If applicable, the old file number of this entity on the records of the Idaho Secretary of State was: W90473

The registered agent on record is:

Registered Agent: CT CORPORATION SYSTEM
Commercial Registered Agent
Physical Address
921 S ORCHARD ST
STE G
BOISE, ID 83705
Mailing Address
921 S ORCHARD ST
STE G
BOISE, ID 83705

Agent or Address Change

☐ Select if you are appointing a new agent.

Limited Liability Company Managers and Members

Name	Title	Business Address
<input checked="" type="checkbox"/> THOMAS S MOFFATT	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> CAROL A DENALE	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> GECILIA TEMPLE	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> SHEELAGH M BEAULIEU	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> JEFFEREY E CLARK	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> CARRIE BUCHANAN WOOD	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> LINDA M CIMBRON	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> KIMBERLEY M DESOUSA	Manager	1 CVS DRIVE WOONSOCKET, RI 02895

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<input checked="" type="checkbox"/> MELANIE K LUKER	Manager	1 CVS DRIVE WOONSOCKET, RI 02895
<input checked="" type="checkbox"/> NEIGHBORCARE PHARMACY SERVICES, LLC	Member	MICHELLE JANVRIN 900 OMNICARE CENTER, 201 EAST 4TH STREET CINCINNATI, OH 45202

The annual report must be signed by an authorized signer of the entity.
Job Title: ASSISTANT SECRETARY

<i>MELANIE K ST ANGELO</i>	<i>01/14/2022</i>
Sign Here	Date