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| No. W 63748 | | Due no later than Jun 30, 2012 | | 2. Registered Agent and Address (NO PO BOX) | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | Annual Report Form 1. Mailing Address: Correct in this box if needed. OMNICARE ESC LLC 100 E RIVERCENTER BLD SUITE 1600 COVINGTON KY 41011 | | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country Postal Code |
| MEMBER | NEIGHBORCARE PHARMACY SERVICES | 100 E RIVERCENTER BLD SUITE 1600 | COVINGTON | KY | USA 41011 |
| 5. Organized Under the Laws of: DE W 63748 | | 6. Annual Report must be signed.* Signature: Jonathan D. Kukulski Name (type or print): Jonathan D. Kukulski Date: 06/20/2012 Title: Secretary | | | |
| Processed 06/20/2012 | | * Electronically provided signatures are accepted as original signatures. | | | |