

No. <b>C 144486</b>		<b>Due no later than Jun 30, 2008</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>Annual Report Form</b>		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702- USA			
		<b>1. Mailing Address: Correct in this box if needed.</b>		3. <u>New</u> Registered Agent Signature:*			
		MEDCO HEALTH SOLUTIONS, INC. ALISA A WISSE F3-16 100 PARSONS POND DRIVE FRANKLIN LAKES NJ 07417 USA					
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JOHN L CASSIS	100 PARSONS POND DRIVE	FRANKLIN LAKES	NJ	USA	07417	
TREASURER	PETER GAYLORD	100 PARSONS POND DRIVE	FRANKLIN LAKES	NJ	USA	07417	
PRESIDENT	TIMOTHY C WENTWORTH	100 PARSONS POND DRIVE	FRANKLIN LAKES	NJ	USA	07417	
SECRETARY	ANDEW A MUNROE	100 PARSONS POND DRIVE	FRANKLIN LAKES	NJ	USA	07417	
5. Organized Under the Laws of:  <b>DE C 144486</b>		6. Annual Report must be signed.* Signature: Crystal Ficken Name (type or print): Crystal Ficken		Date: 06/02/2008 Title: Power of Attorney			
Processed 06/02/2008		* Electronically provided signatures are accepted as original signatures.					