No. W 32575	Due no later than August 31, 2006 Annual Report Form	2. Registered Agent and Office NO PO BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE. ID 83720-0080	1. Mailing Address - Correct In this box, if applicable EXPRESS PHARMACY SERVICES OF FL, L. ONE CVS DRIVE WOONSOCKET, RI 02895	CT CORPORATION SERVICES 300 N 6TH ST BOISE, ID 83702
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature
 Limited Liability Compan 	ies: Enter Names and Addresses of Members.	
Office held Name	Street or P.O. Address City	<u>State</u> <u>Zip</u>
MBR. Express Pharm Securcus of	acy One cus drive woon mo, Inc	tocket RI 00895
5. Organized Under the Laws of: FLORIDA W 32575	Signature Melanie K. Luker	Date 8 18 106 Title Assistant Secretary
Issued 06/01/2006	Do Not Tape or Staple	200608000006