

No. W 12343	Due no later than June 30, 2005 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 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable MCKESSON MEDICATION MANAGEMENT LLC ATTN: DIRECTOR LEGAL SERVICES 7115 NORTHLAND TERRACE STE 500 BROOKLYN PARK, MN 55428 1546		PRENTICE HALL CORP SYSTEM 1401 SHORELINE DR BOISE, ID 83702 1546 3. <u>New</u> Registered Agent Signature																								
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>Manager, Eleonore M. Saenger,</td> <td>7115 Northland Terrace Suite 500,</td> <td>Brooklyn Park,</td> <td>MN</td> <td>55428</td> </tr> <tr> <td></td> <td>Manager, Kristina Veaco,</td> <td>One Post Street,</td> <td>San Francisco,</td> <td>CA</td> <td>94104</td> </tr> <tr> <td></td> <td>Manager, John H. Hammergren,</td> <td>One Post Street,</td> <td>San Francisco,</td> <td>Ca</td> <td>94104</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		Manager, Eleonore M. Saenger,	7115 Northland Terrace Suite 500,	Brooklyn Park,	MN	55428		Manager, Kristina Veaco,	One Post Street,	San Francisco,	CA	94104		Manager, John H. Hammergren,	One Post Street,	San Francisco,	Ca	94104
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>																						
	Manager, Eleonore M. Saenger,	7115 Northland Terrace Suite 500,	Brooklyn Park,	MN	55428																						
	Manager, Kristina Veaco,	One Post Street,	San Francisco,	CA	94104																						
	Manager, John H. Hammergren,	One Post Street,	San Francisco,	Ca	94104																						
5. Organized Under the Laws of: DELAWARE W 12343	6 Signature <u>Eleonore M Saenger</u> Name (Typed or Printed) Eleonore M. Saenger			Date <u>05/04/2005</u> Title <u>Manager</u>																							

Issued 04/01/2005

Do Not Tape or Staple

200506000082