

No. W 66414		Due no later than Sep 30, 2009		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. CHOICE SOURCE THERAPEUTIC SOUTH, L.L.C. MELANIE LUKER ONE CVS DRIVE WOONSOCKET RI 02895 USA		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 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	CAREMARK RX, L.L.C.	ONE CVS DRIVE	WOONSOCKET	RI	USA 02895
5. Organized Under the Laws of: MO W 66414		6. Annual Report must be signed.* Signature: Thomas S. Moffatt Name (type or print): Thomas S. Moffatt Date: 09/09/2009 Title: Assistant Secretary			
Processed 09/09/2009		* Electronically provided signatures are accepted as original signatures.			