

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805947

FILED  
Apr 20, 2012  
Secretary of State

Entity Name: MELVILLE REALTY COMPANY INC

**Current Principal Place of Business:**

ONE CVS DR  
WOONSOCKET, RI 02895 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE CVS DR  
C/O LEGAL DEPT  
WOONSOCKET, RI 02895 US

**New Mailing Address:**

FEI Number: 04-6050302      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MOFFATT, THOMAS S  
Address: ONE CVS DRIVE  
City-St-Zip: WOONSOCKET, RI 02895 US

Title: VTD  
Name: DENALE, CAROL A  
Address: ONE CVS DR  
City-St-Zip: WOONSOCKET, RI 02895 US

Title: S  
Name: MELANIE, LUKER  
Address: ONE CVS DRIVE  
City-St-Zip: WOONSOCKET, RI 02895 US

Title: AS  
Name: LINDA, CIMBRON M  
Address: ONE CVS DRIVE  
City-St-Zip: WOONSOCKET, RI 02895 US

Title: VAT  
Name: CORRIGAN, TERENCE M  
Address: ONE CVS DRIVE  
City-St-Zip: WOONSOCKET, RI 02895

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELANIE K LUKER

S

04/20/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date