

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002143

Entity Name: CARDINAL HEALTH 101, INC.

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

C/O CARDINAL HEALTH, INC.
7000 CARDINAL PLACE
DUBLIN, OH 43017

New Principal Place of Business:

Current Mailing Address:

C/O CARDINAL HEALTH, INC.
7000 CARDINAL PLACE
DUBLIN, OH 43017

New Mailing Address:

FEI Number: 74-3005641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WINSTEAD, DWIGHT
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: D () Delete
Name: HARTY, LINDA S
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: VPTX () Delete
Name: GREGG, SCOTT A
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: S () Delete
Name: FONG, IVAN K
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

Title: T () Delete
Name: HARTY, LINDA S
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: GOMEZ, JORGE
Address: 7000 CARDINAL PLACE
City-St-Zip: DUBLIN, OH 43017

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SCOTT A. GREGG

SVP

04/25/2007

Electronic Signature of Signing Officer or Director

_____ Date