

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90110 009 ***150.00

DOCUMENT # F94000004155

1. Entity Name
MEDINET, INC.

Principal Place of Business
**8121 10TH AVE N.
 GOLDEN VALLEY MN 55427**

Mailing Address
**8121 10TH AVE N.
 GOLDEN VALLEY MN 55427**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

**One Post Street
 Suite, Apt. #, etc.
 2950**

City & State

City & State
San Francisco, CA

4. FEI Number **41-1726114**

Applied For
 Not Applicable

Zip Country

Zip Country
94104 USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. * ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P <input checked="" type="checkbox"/> Delete
NAME	NAILE, THOMAS C
STREET ADDRESS	8121 10TH AVE N.
CITY-ST-ZIP	GOLDEN VALLEY MN 55427
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	JULIAN, PAUL C
STREET ADDRESS	ONE POST ST.
CITY-ST-ZIP	SAN FRANCISCO CA 94104
TITLE	V <input type="checkbox"/> Delete
NAME	BESKE, GAIL
STREET ADDRESS	8121 10TH AVE N.
CITY-ST-ZIP	GOLDEN VALLEY MN 55427
TITLE	DT <input type="checkbox"/> Delete
NAME	LOIACONO, NICHOLAS A
STREET ADDRESS	ONE POST ST
CITY-ST-ZIP	SAN FRANCISCO CA 94104
TITLE	DS <input type="checkbox"/> Delete
NAME	VEACO, KRISTINA
STREET ADDRESS	ONE POST STREET
CITY-ST-ZIP	SAN FRANCISCO CA 94104
TITLE	D <input type="checkbox"/> Delete
NAME	HIMES, BRETT
STREET ADDRESS	8741 LANDMARK RD
CITY-ST-ZIP	RICHMOND VA 23228

TITLE	P & CEO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gary H. Keeler
STREET ADDRESS	8121 10th Avenue N.
CITY-ST-ZIP	Golden Valley, MN 55427
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kevin M. Swan
STREET ADDRESS	8741 Landmark Road
CITY-ST-ZIP	Richmond, VA 23228
TITLE	VP, CFO & Assistant Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like as empowered.

SIGNATURE: **Andrew G. Katzer, Assistant Secretary**
 Date: **March 29, 2001** Daytime Phone #: **(415) 983-9214**

* PLEASE SEE ATTACHMENT

CR2E034 (10/00)

Document#
F940000034155

Directors, Officers Report

MEDINET, INC.

525242

DIRECTORS AND OFFICERS

Brett S. Himes	Director McKesson HBOC, Inc. One Post Street San Francisco, CA 94104
Nicholas A. Loiacono	Vice President, Treasurer and Director McKesson HBOC, Inc. One Post Street San Francisco, CA 94104
Kevin M. Swan	Director 8741 Landmark Road Richmond, VA 23228
Kristina Veaco	Vice President, Secretary and Director McKesson HBOC, Inc. One Post Street San Francisco, CA 94104
Gary H. Keeler	President and Chief Executive Officer 8121 10 th Avenue North Golden Valley, MN 55427
Gail Beske	Chief Financial Officer, Vice President and Assistant Treasurer 8121 10 th Avenue North Golden Valley, MN 55427
Bill Blanchfill	Vice President, Chief Compliance Officer and Assistant Secretary 8121 10 th Avenue North Golden Valley, MN 55427
Thomas C. Naile	Vice President Reimbursement Services 8121 10 th Avenue North Golden Valley, MN 55427
Jean Serafin	Vice President Marketing/Vendor Relations 8121 10 th Avenue North Golden Valley, MN 55427
Glenette E. Babb	Assistant Secretary McKesson HBOC, Inc. One Post Street San Francisco, CA 94104
Ronald Y. Chin	Assistant Secretary McKesson HBOC, Inc. One Post Street San Francisco, CA 94104