2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004410

Entity Name: MCKESSON CORPORATION

FILED Mar 23, 2005 Secretary of State

Current Bringing Blood of Business				New Principal Place of Business:		
Current Principal Place of Business: ONE POST ST. SAN FRANCISCO, CA 94104 New Principal Place of Business: New Principal Place of Business:						
Current Mailing Address:				New Mailing Address:		
ONE POST STREET ATTN: GLENETTE E. BABB SAN FRANCISCO, CA 94104				ONE POST STREET - 33RD FLOOR ATTN: GLENETTE E. BABB SAN FRANCISCO, CA 94104		
FEI Number: 9	94-3207296	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST., #105 TALLAHASSEE, FL 32301 US 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.						
SIGNATUR		Signature of Degistered Agent	-			 Date
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution ().						Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Address:	PD () E HAMMERGREN, ONE POST ST. SAN FRANCISCO			Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	V ()[CAMPBELL, JEF ONE POST ST. SAN FRANCISCO			Title: Name: Address: City-St-Zip:	CAMPBELL, ONE POST S	
	VGS () E MEYERSON, IVA ONE POST ST. SAN FRANCISCO			Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D () E JACOBS, CHRIS 5203 BRISOL IN BUFORD, GA 30	TINE M DUSTRIAL WAY		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D () [MATSCHULLAT, 537 STEAMBOAI GREENWICH, C	R ROAD		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	V ()[JULIAN, PAUL C ONE POST ST. SAN FRANCISCO	Delete D, CA 94104		Title: Name: Address: City-St-Zip:	JULIAN, PAU ONE POST S	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GLENETTE E BABB AS 03/23/2005