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May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P26206 (3)

1. Corporation Name
VITALINK PHARMACY SERVICES, INC.

[redacted]

Principal Place of Business	Mailing Address
10750 COLUMBIA PIKE SILVER SPRING MD 20901	10750 COLUMBIA PIKE SILVER SPRING MD 20901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/27/1989

2. Principal Place of Business	2a. Mailing Address
21 1250 E. Diehl Road	26 11555 Darnestown Rd.
Suite, Apt. #, etc. 22 Suite 208	Suite, Apt. #, etc. 27
City & State 23 Naperville, Illinois	City & State 28 Gaithersburg, Md.
Zip / Country 24 60563 / 25	Zip / Country 29 20878 / 30

4. FEI Number: 37-0903482 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
-05/22/98--01011--026
83 ***150.00
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CCEO BAINUM, STEWART, JR. 10750 COLUMBIA PIKE SILVER SPRING MD 20901	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Senior VP, Secretary & General Counsel Horner, III, Robert W. One Ravinia Drive, Suite 1240 Atlanta, Georgia 30346	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC TOMASSO, DONALD C. 10750 COLUMBIA PIKE SILVER SPRING MD 20901	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP and Corporate Controller Sentoro, Thomas J. 1250 E. Diehl Road, Suite 208 Naperville, Illinois 60563	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCOO DENARDO, DONNA L. 10750 COLUMBIA PIKE SILVER SPRING MD 20901	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	PCOO Denardo, Donna L. 1250 E. Diehl Road, Suite 208 Naperville, Illinois 60563	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S REMPE, JAMES H. 10750 COLUMBIA PIKE SILVER SPRING MD 20901	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	Senior Corporate Counsel & Assistant Secretary Barlett, Jeanne M. 1250 E. Diehl Road, Suite 208 Naperville, Illinois 60563	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPFO MACOMBER, SCOTT T. 10750 COLUMBIA PIKE SILVER SPRING MD 20901	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	Senior VP, CFO, Treasurer Macomber, Scott T. 1250 E. Diehl Rd., Suite 208 Naperville, Illinois 60563	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC TOMASSO, DONALD C. 10750 COLUMBIA PIKE SILVER SPRING MD 20901	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	Senior VP - Human Resources Thompson, Stephen A. 1250 E. Diehl Road, Suite 208 Naperville, Illinois 60563	☐ Change ☒ Addition

CRPFR4 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [redacted] 4/22/98