

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000012800

**Entity Name:** MEDCO HEALTH SOLUTIONS OF HIDDEN RIVER, L.C.

**Current Principal Place of Business:**

8800 HIDDEN RIVER PARKWAY  
TAMPA, FL 33637

**Current Mailing Address:**

8800 HIDDEN RIVER PARKWAY  
TAMPA, FL 33637 US

**FEI Number:** 59-3736512

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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.*

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

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name HALL, JEFFREY L  
Address ONE EXPRESS WAY  
City-State-Zip: ST. LOUIS MO 63121

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY L. HALL

MGR

04/26/2013

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date