## 2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003266

Entity Name: MEDCO HEALTH SOLUTIONS, INC.

#### **Current Principal Place of Business:**

100 PARSONS POND DRIVE FRANKLIN LAKES, NJ 07417

### **Current Mailing Address:**

100 PARSONS POND DRIVE FRANKLIN LAKES, NJ 07417 US

# FEI Number: 22-3461740

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

# FILED Jan 22, 2019 Secretary of State 9344374023CC

Certificate of Status Desired: No

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

### Officer/Director Detail :

Title	DIRECTOR, SECRETARY	Title	PRESIDENT
Name	AKINS, MARTIN P	Name	QUELLER, DAVID
Address	ONE EXPRESS WAY	Address	100 PARSONS POND DRIVE
City-State-Zip	ST. LOUIS MO 63121	City-State-Zip:	FRANKLIN LAKES NJ 07417
Title	TREASURER, VP	Title	ASSISTANT SECRETARY
Name	SMITH, TIMOTHY	Name	FAHS, ROD
Address	100 PARSONS POND DRIVE	Address	100 PARSONS POND DRIVE
City-State-Zip	: FRANKLIN LAKES NJ 07417	City-State-Zip:	FRANKLIN LAKES NJ 07417
		<b>-</b>	
Title	VP	Title	VICE PRESIDENT
Name	MIMLITZ, JOHN	Name	PHILLIPS, BRADLEY
Address	100 PARSONS POND DRIVE	Address	100 PARSONS POND DRIVE
City-State-Zip	: FRANKLIN LAKES NJ 07417	City-State-Zip:	FRANKLIN LAKES NJ 07417

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 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 all other like empowered.

SIGNATURE: MARTIN P. AKINS

SECRETARY

01/22/2019

Date

Electronic Signature of Signing Officer/Director Detail

Date