

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000669

Entity Name: ACCREDO HEALTH GROUP, INC.**Current Principal Place of Business:**1640 CENTURY CENTER PARKWAY
SUITE 105
MEMPHIS, TN 38134**Current Mailing Address:**1640 CENTURY CENTER PARKWAY
SUITE 105
MEMPHIS, TN 38134 US**FEI Number:** 11-3358535**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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**Officer/Director Detail :**

Title	PRESIDENT
Name	EBLING, KEITH J
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	SECRETARY, DIRECTOR
Name	AKINS, MARTIN P
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	VP
Name	KNIBB, CHRISTOPHER
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	ASST. SECRETARY
Name	GANDI, GAURANG
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	ASST. SECRETARY
Name	MCGINNIS, CHRISTOPHER
Address	ONE EXPRESS WAY
City-State-Zip:	ST. LOUIS MO 63121

Title	ASST. SECRETARY
Name	PERINI, VICTOR
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 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****04/22/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date