

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90285 005 \*1,200.00

DOCUMENT # 851730

1. Corporation Name  
BIG B, INC.

Principal Place of Business

ONE CVS DR  
WOONSOCKET RI 02895  
US

Mailing Address

ONE CVS DR  
LEGAL DEPT  
WOONSOCKET RI 02895  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1982

4. FEI Number

63-0632551

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 the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME RYAN, THOMAS M  
STREET ADDRESS ONE CVS DR  
CITY-ST-ZIP WOONSOCKET RI 02895 ☐ DELETE

TITLE D  
NAME CONAWAY, CHARLES C  
STREET ADDRESS ONE CVS DR  
CITY-ST-ZIP WOONSOCKET RI 02895 ☐ DELETE

TITLE D  
NAME NELSON, DANIEL C  
STREET ADDRESS ONE CVS DR  
CITY-ST-ZIP WOONSOCKET RI 02895 ☐ DELETE

TITLE VPS  
NAME LANKOWSKY, ZENON P  
STREET ADDRESS ONE CVS DR  
CITY-ST-ZIP WOONSOCKET RI 02895 ☐ DELETE

TITLE T  
NAME SOLBERG, LARRY D  
STREET ADDRESS ONE CVS DR  
CITY-ST-ZIP WOONSOCKET RI 02895 ☐ DELETE

TITLE AS  
NAME LUKER, MELANIE K  
STREET ADDRESS ONE CVS DR  
CITY-ST-ZIP WOONSOCKET RI 02895 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Vice Chairman + Chief Operating Officer ☐ Change ☐ Addition  
1.2 NAME Thompson, M. Ryan  
1.3 STREET ADDRESS One CVS DR  
1.4 CITY-ST-ZIP Woonsocket RI 02895

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS Please see attached  
2.4 CITY-ST-ZIP

3.1 TITLE Director ☒ Change ☐ Addition  
3.2 NAME Michael Goldstein  
3.3 STREET ADDRESS One CVS DR  
3.4 CITY-ST-ZIP Woonsocket RI 02895

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE V.P. + TREASURER ☒ Change ☐ Addition  
5.2 NAME Philip C. Galbraith  
5.3 STREET ADDRESS One CVS DR  
5.4 CITY-ST-ZIP Woonsocket RI 02895

6.1 TITLE AS ☐ Change ☒ Addition  
6.2 NAME Thomas S. Moffatt  
6.3 STREET ADDRESS One CVS DR  
6.4 CITY-ST-ZIP Woonsocket RI 02895

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED NAME OF REGISTERED AGENT OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)

4/5/99 (40) 70-3865