

2002 UNIFORM BUSINESS REPORT (UBR)

0603008 AT

DOCUMENT # 851950

1. Entity Name
CAEMARK INC.

APPROVED
AND
FILED

02 FEB -5 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2211 SANDERS RD
NORTHBROOK IL 60062
US

Mailing Address

3000 GALLERIA TOWER
STE 1000
BIRMINGHAM AL 35244
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

95-3382344

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST
SUITE 105
TALLAHASSEE FL 32301

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME SCARDINA, RICHARD
STREET ADDRESS 2211 SANDERS ROAD
CITY-ST-ZIP NORTHBROOK IL 60062

TITLE T ☐ Change ☒ Addition
NAME Connie M. Isley
STREET ADDRESS 2211 Sanders Rd.
CITY-ST-ZIP Northbrook, IL 60062

TITLE VD ☐ Delete
NAME GOLDING, DAVID W
STREET ADDRESS 2211 SANDERS ROAD
CITY-ST-ZIP NORTHBROOK IL 60062

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VSD ☐ Delete
NAME FINELY, SARA J
STREET ADDRESS 3000 GALLERIA TOWER, SUITE 1000
CITY-ST-ZIP BIRMINGHAM AL 35244

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☒ Delete
NAME KIZER, LEISA S
STREET ADDRESS 3000 GALLERIA TOWER, SUITE 1000
CITY-ST-ZIP BIRMINGHAM AL 35244

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-24-02

Date

(205) 733-8996

Daytime Phone #

CR2E034 (9/01)



ACCOUNT NO. : 072100000032

REFERENCE : 347442 4390339

AUTHORIZATION : *Patricia Piggett*

COST LIMIT : \$ 150.00

ORDER DATE : February 5, 2002

ORDER TIME : 10:46 AM

ORDER NO. : 347442-005

CUSTOMER NO: 4390339

CUSTOMER: Ms. Susan Lester
Caremark Rx, Inc.
3000 Galleria Tower
Suite 1000
Birmingham, AL 35244

RECEIVED
02 FEB -5 AM 11:23
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32310

ANNUAL REPORT FILING

NAME: CAREMARK INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 1156

EXAMINER'S INITIALS: _____