

## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F03000002719

1. Entity Name  
ADVANCEPCS HOLDING CORPORATION



Principal Place of Business  
9501 EAST SHEA BLVD.  
SCOTTSDALE, AZ 85260

Mailing Address  
211 COMMERCE STREET  
SUITE 800  
NASHVILLE, TN 37201

FILED

06 JUN 23 PM 1:16

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06132006 No Chg-P CR2E034 (11/05)

4. FEI Number  
94-3040479

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

DO NOT WRITE  
IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00  
Due by September 6, 2006

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MCCLURE, HOWARD A
STREET ADDRESS	211 COMMERCE STREET, SUITE 800
CITY-ST-ZIP	NASHVILLE, TN 37201
TITLE	VSD
NAME	FINLEY, SARA J
STREET ADDRESS	211 COMMERCE STREET, SUITE 800
CITY-ST-ZIP	NASHVILLE, TN 37201
TITLE	T
NAME	CLEMONS, PETER J IV
STREET ADDRESS	211 COMMERCE STREET, SUITE 800
CITY-ST-ZIP	NASHVILLE, TN 37201
TITLE	VD
NAME	KARRO, BRADLEY S
STREET ADDRESS	211 COMMERCE STREET, SUITE 800
CITY-ST-ZIP	NASHVILLE, TN 37201
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Denise Sommer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Denise Sommer  
Asst. Corp. Secretary

6/13/06

615 743-6620

Date

Daytime Phone #



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 196990 7416132

AUTHORIZATION :

COST LIMIT : \$ 550.00

ORDER DATE : June 21, 2006

ORDER TIME : 7:17 PM

ORDER NO. : 196990-075

CUSTOMER NO: 7416132

ANNUAL REPORT FILING

NAME: ADVANCEPCS HOLDING CORPORATION

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea-EXT#2914

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
06 JUN 23 AM 9:00  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA