2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004410

Entity Name: MCKESSON CORPORATION

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
ONE POST ST. SAN FRANCISCO, CA 94104							
Current Mailing Address:				New Mailing Address:			
ONE POST STREET - 33RD FLOOR ATTN: GLENETTE E. BABB SAN FRANCISCO, CA 94104			ONE POST STREET - 35TH FLOOR ATTN: MELISSA WU SAN FRANCISCO, CA 94104				
FEI Number: 94-3207296 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST., #105 TALLAHASSEE, FL 32301 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:							
	Electroni	c Signature of Registered Agent	t			Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () HAMMERGREN, ONE POST ST. SAN FRANCISCO			Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	VCFO () CAMPBELL, JEF ONE POST ST. SAN FRANCISCO			Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	EVGS () SEEGER, LAUR ONE POST ST. SAN FRANCISCO			Title: Name: Address: City-St-Zip:	() (Change () Addition	
Title: Name: Address: City-St-Zip:	AS () BABB, GLENETT ONE POST STR SAN FRANCISCO	E E EET		Title: Name: Address: City-St-Zip:	AS (X) O WU, MELISSA ONE POST STRE SAN FRANCISCO		
Title: Name: Address: City-St-Zip:	D () MATSCHULLAT, 537 STEAMBOA GREENWICH, C	T ROAD		Title: Name: Address: City-St-Zip:	D (X) 0 BRYANT, ANDY 1 220 MISSION CO SANTA CLARA, 0	DLLEGE BLVD.	
Title: Name: Address: City-St-Zip:	EVP () JULIAN, PAUL C ONE POST ST. SAN FRANCISCO	Delete D, CA 94104		Title: Name: Address: City-St-Zip:	()(Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MELISSA WU AS 04/17/2008