

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000003972

FILED
Feb 01, 2002 8:00 AM
Secretary of State

Entity Name: MCKESSON HEALTH SOLUTIONS ARIZONA INC.

Current Principal Place of Business:

9700 N. 91ST STREET
232
SCOTTSDALE, AZ 852585036 US

Current Mailing Address:

MCKESSON/HBOC, ATTN: G. E. BABB
ONE POST STREET, 29TH FLOOR
SAN FRANCISCO, CA 94104 US

New Principal Place of Business:

9700 N. 91ST STREET
SUITE 232
SCOTTSDALE, AZ 852585036 US

New Mailing Address:

ATTN: GLENETTE E BABB
ONE POST STREET, 29TH FLOOR
SAN FRANCISCO, CA 94104 US

FEI Number: 94-3205587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET, SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES STREET
SUITE 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:

02/01/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GLASER, ROBERT J
Address: 101 COLLEGE ROAD EAST
City-St-Zip: PRINCETON, NJ 08540

Title: V () Delete
Name: BENZING, LYNN
Address: 101 COLLEGE ROAD EAST
City-St-Zip: PRINCETON, NJ 08540

Title: VSD () Delete
Name: VEACO, KRISTINA
Address: ONE POST STREET
City-St-Zip: SAN FRANCISCO, CA 94104

Title: VTD () Delete
Name: LOIACONO, NICHOLAS A
Address: ONE POST STREET
City-St-Zip: SAN FRANCISCO, CA 94104

Title: V () Delete
Name: HOFFMAN, STEVE M
Address: 9700 N 91ST STREET, SUITE 232
City-St-Zip: SCOTTSDALE, AZ 85258

Title: P () Delete
Name: PFAU, MARGARET M.
Address: 9700 N 91ST STREET, SUITE 232
City-St-Zip: SCOTTSDALE, AZ 85258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PFAU, MARGARET M
Address: 9700 N 91ST STREET, SUITE 232
City-St-Zip: SCOTTSDALE, AZ 85258 US

Title: AS (X) Change () Addition
Name: BABB, GLENETTE E
Address: ONE POST STREET
City-St-Zip: SAN FRANCISCO, CA 94104 US

Title: VSD (X) Change () Addition
Name: VEACO, KRISTINA
Address: ONE POST STREET
City-St-Zip: SAN FRANCISCO, CA 94104 US

Title: VTD (X) Change () Addition
Name: LOIACONO, NICHOLAS A
Address: ONE POST STREET
City-St-Zip: SAN FRANCISCO, CA 94104 US

Title: V (X) Change () Addition
Name: HOFFMAN, STEVE M
Address: 9700 N 91ST STREET, SUITE 232
City-St-Zip: SCOTTSDALE, AZ 85258 US

Title: AS (X) Change () Addition
Name: KATZER, ANDREW G
Address: ONE POST STREET
City-St-Zip: SAN FRANCISCO, CA 94104 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GLENETTE E BABB

AS

02/01/2002

Electronic Signature of Signing Officer or Director

Date