## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F95000003972

Entity Name: MCKESSON HEALTH SOLUTIONS ARIZONA INC.

FILED Apr 21, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
SUITE 232	ST STREET ALE, AZ 85258	5036 US				
Current Mailing Address:				New Mailing Address:		
ATTN: GLENETTE E BABB ONE POST STREET, 29TH FLOOR SAN FRANCISCO, CA 94104 US			ATTN: GLENETTE E BABB ONE POST STREET, 34TH FLOOR SAN FRANCISCO, CA 94104 US			
FEI Number:	94-3205587	FEI Number Applied For ( )	FEI Nun	nber Not Appl	icable ( )	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 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:						
	Electroni	Signature of Registered Agen	it			Date
Election Campaign Financing Trust Fund Contribution ( ).  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS.						
Title: Name: Address: City-St-Zip:	PFAU, MARGAR	REET, SUITE 232		Title: Name: Address: City-St-Zip:	PD (X) C PFAU, MARGARE ONE POST STRE SAN FRANCISCO	ET
Title: Name: Address: City-St-Zip:	AS () I BABB, GLENETT ONE POST STRI SAN FRANCISCO	EET		Title: Name: Address: City-St-Zip:	()0	hange ( ) Addition
Title: Name: Address: City-St-Zip:	VSD ( ) I VEACO, KRISTIN ONE POST STRI SAN FRANCISCO	EET		Title: Name: Address: City-St-Zip:	() C	hange()Addition
Title: Name: Address: City-St-Zip:	VTD () I LOIACONO, NICI ONE POST STRI SAN FRANCISCO	HOLAS A EET		Title: Name: Address: City-St-Zip:	()C	hange ( ) Addition
Title: Name: Address: City-St-Zip:	HOFFMAN, STE	REET, SUITE 232		Title: Name: Address: City-St-Zip:	V (X) O O'NEILL, WILLIAM ONE POST STRE SAN FRANCISCO	ET
Title: Name: Address:	AS () I KATZER, ANDRE ONE POST STRI			Title: Name: Address:	AS (X) C SHUFORD, ANNE ONE POST STRE	

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.

City-St-Zip: SAN FRANCISCO, CA 94104 US

SIGNATURE: GLENETTE E. BABB AS 04/21/2003

SAN FRANCISCO, CA 94104 US

City-St-Zip:

WILLIAM E WAGSTAFF, AS ONE POST STREET SAN FRANCISCO, CA 94104

SUSAN PENWAY, AS ONE POST STREET SAN FRANCISCO, CA 94104

WILLIAM H BRENNAN, AS ONE POST STREET SAN FRANCISCO, CA 94104

DEETTE THOMAS, V 9700 N 91ST STREET, SUITE 232 SCOTTSDALE, AZ 85258