

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State
 05-16-2001 90014 049 ***158.75

DOCUMENT # F95000004019

1. Entity Name
CM DELAWARE CORPORATION

Principal Place of Business 100 SUMMIT AVENUE MONTVALE NJ 07645	Mailing Address % MERCK & CO., INC., TAX DEPARTMENT ONE MERCK DRIVE WHITEHOUSE STATION NJ 08889-0100
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549852



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <i>One Merck Medco Managed Care LLC</i> Suite, Apt. #, etc. 100 PARSONS POND DRIVE		3. Mailing Address Suite, Apt. #, etc.	
City & State FRANKLIN LAKE NJ		City & State	
Zip 07417	Country	Zip	Country
4. FEI Number 22-2715775		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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 _____ (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) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DUFFY, JAMES B SUMNEYTOWN PIKE WEST POINT PA 19486 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Bert I. Weinstein One Merck Drive Whitehouse Station NJ 08889 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP REED, JOANN A 100 PARSONS POND DRIVE FRANKLIN LAKES NJ 07417 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DORSA, CAROLINE ONE MERCK DRIVE WHITEHOUSE STATION NJ 08889 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FINDLING, MICHAEL 100 PARSONS POND DRIVE FRANKLIN LAKES NJ 07417 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Secretary Debra Bollwage One Merck Drive Whitehouse Station NJ 08889 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCGOVERN, ROBERT B 1 MERCK DRIVE WHITEHOUSE STATION NJ 08889 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Robert B. McGovern* **Robert B. McGovern Vice President** **908-423-1600**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Document#
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Merck & Co., Inc.
One Merck Drive
P.O. Box 100
Whitehouse Station NJ 08889-0100

549852

April 13, 2001



Division of Corporations
Annual Report Filings
PO Box 1500
Tallahassee, FL 32302-1500


Subject: CM Delaware, Inc.
2001 Annual Report

Gentlemen:

As you requested, we have completed and enclosed the above for filing, together with our check in full payment of the tax, if any is shown to be due.

As acknowledgment of receipt, please sign the enclosed copy of this letter and return it in the business reply envelope provided.

Sincerely,


Cathy Hartman
Sr. Tax Specialist - Domestic Compliance

Ph(908) 423-4132

Fx(908) 735-1281

~~\$158-75~~
CMDEL 9-1(01)

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Merck & Co., Inc.
One Merck Drive
P.O. Box 100
Whitehouse Station NJ 08889-0100

April 13, 2001



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Annual Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

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As acknowledgment of receipt, please sign the enclosed copy of this letter and return it in the business reply envelope provided.

Sincerely,

A handwritten signature in cursive script that reads "Cathy Hartman".

Cathy Hartman
Sr. Tax Specialist - Domestic Compliance

Ph(908) 423-4132
Fx(908) 735-1281

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CMDEL 9-1(01)