

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003261

FILED
Apr 22, 2009
Secretary of State

Entity Name: WALGREENS HOME CARE, INC.

Current Principal Place of Business:

104 WILMOT RD
DEERFIELD, IL 60015

New Principal Place of Business:

Current Mailing Address:

104 WILMOT RD
ATTN: TAX DEPARTMENT
DEERFIELD, IL 60015

New Mailing Address:

104 WILMOT RD
ATTN: TAX DEPT, MS #1435
DEERFIELD, IL 60015

FEI Number: 36-4100874

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: GREEN, DANA I.
Address: 200 WILMOT RD
City-St-Zip: DEERFIELD, IL 60015

Title: DVP () Delete
Name: HODGE, G.J.
Address: 104 WILMOT RD
City-St-Zip: DEERFIELD, IL 60015

Title: DSVP () Delete
Name: RESNICK, ALLAN M
Address: 104 WILMOT RD
City-St-Zip: DEERFIELD, IL 60015

Title: P () Delete
Name: STANLEY, BLAYLOCK B
Address: 1411 LAKE COOK ROAD, 4N
City-St-Zip: DEERFIELD, IL 60015

Title: VPT () Delete
Name: KELLEN, MARGARITA E
Address: 104 WILMOT RD
City-St-Zip: DEERFIELD, IL 60015

Title: AS () Delete
Name: WOODBRIDGE, DAVID J
Address: 200 WILMOT ROAD
City-St-Zip: DEERFIELD, IL 60015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DSVP (X) Change () Addition
Name: GREEN, DANA I
Address: 200 WILMOT RD
City-St-Zip: DEERFIELD, IL 60015

Title: DVP (X) Change () Addition
Name: HODGE, GARRICK J
Address: 104 WILMOT RD
City-St-Zip: DEERFIELD, IL 60015

Title: DP (X) Change () Addition
Name: BLAYLOCK, STANLEY B
Address: 1411 LAKE COOK ROAD, 4N
City-St-Zip: DEERFIELD, IL 60015

Title: VP (X) Change () Addition
Name: MASTRAPA, PAUL F
Address: 485 HALF DAY ROAD, SUITE 300
City-St-Zip: BUFFALO GROVE, IL 60089

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SILVERMAN, ROBERT M
Address: 104 WILMOT ROAD
City-St-Zip: DEERFIELD, IL 60015

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: MARGARITA E. KELLEN

VPT

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date