2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000833

Entity Name: MCKESSON SPECIALTY PHARMACEUTICALS LLC

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE POST STREET 104 WILMOT ROAD SAN FRANCISCO, CA 941045296 US DEERFIELD, IL 60015 US **Current Mailing Address: New Mailing Address:** ONE POST STREET, 35TH FLOOR C/O TAX DEPT, MS #1435 104 WILMOT ROAD ATTN: MELISSA WU SAN FRANCISCO, CA 941045296 US DEERFIELD, IL 60015 US FEI Number: 01-0555467 FEI Number Applied For () FEI Number 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 HAYS 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Delete (X) Change () Addition LOIACONO, NICHOLAS A BLAYLOCK, STANLEY B Name: Name: ONE POST STREET Address: 1411 LAKE COOK ROAD, 4N Address: City-St-Zip: SAN FRANCISCO, CA 941045296 City-St-Zip: DEERFIELD, IL 60015 Title: MGR () Delete Title: MGR (X) Change () Addition BLAKE, PATRICK Name: SPINA, JOHN W Name: Address: ONE POST STREET Address: 200 WILMOT ROAD City-St-Zip: SAN FRANCISCO, CA 94104 City-St-Zip: DEERFIELD, IL 60015 Title: MGR () Delete Title: MGR (X) Change () Addition BOGAN, WILLIE C GREEN, DANA I Name: Name: Address: ONE POST STREET Address: 200 WILMOT ROAD City-St-Zip: SAN FRANCISCO, CA 941045296 City-St-Zip: DEERFIELD, IL 60015 Title: Title: () Change (X) Addition () Delete Name: Name: NAMETH, MICHAEL 500 NOBLESTOWN ROAD, STE 200 Address: Address: City-St-Zip: City-St-Zip: CARNEGIE, PA 15106 Title: () Delete Title: () Change (X) Addition FELISH, MICHAEL Name: Name: 104 WILMOT ROAD Address: Address: City-St-Zip: City-St-Zip: DEERFIELD, IL 60015 Title: () Delete Title: () Change (X) Addition MANN, JOHN A Name: Name: Address: Address: 104 WILMOT ROAD DEERFIELD, IL 60015 City-St-Zip: City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL FELISH AT 04/23/2009