

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000004653

Entity Name: THERACOM, L.L.C.

FILED  
Jan 30, 2008  
Secretary of State

**Current Principal Place of Business:**

7917 KEY WEST AVENUE  
ROCKVILLE, MD 20850

**New Principal Place of Business:**

**Current Mailing Address:**

7917 KEY WEST AVENUE  
ROCKVILLE, MD 20850

**New Mailing Address:**

211 COMMERCE STREET  
SUITE 800  
NASHVILLE, TN 37201

FEI Number: 52-2005869

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CHOICE SOURCE, LLC,  
Address: 211 COMMERCE STREET, SUITE 800  
City-St-Zip: NASHVILLE, TN 37201

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ADVANCEPCS SPECIALTY, RX, LLC  
Address: 9501 E. SHE BLVD  
City-St-Zip: SCOTTSDALE, AZ 85260

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: SARA J. FINLEY

MGRM

01/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date