


FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 203.75		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company Merck-Medco Managed Care, LLC MERGERCO DELAWARE NO. 1, L.L.C. 100 SUMMIT AVENUE MONTVALE NJ 07645		DOCUMENT # M96000000458 1a. Principal Place of Business Address 100 SUMMIT AVENUE MONTVALE NJ 07645	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		2a. Mailing Address Suite, Apt. #, etc. City & State Zip	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		Merck Co., Inc One Merck Drive WS2F96 Whitehouse Station 0889-0100	
3. Date Organized or Qualified 1.1/20/1996		3a. State of Formation DE	
4. FEI Number 22-3461740		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.		SIGNATURE _____ DATE _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>	
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	DORSA, CAROLINE	ONE MERCK DRIVE	WHITEHOUSE STATION NJ
MGR	KANTER, CARL I	100 SUMMIT AVENUE	MONTVALE NJ
MGR	WEINSTEIN, BERT I	100 SUMMIT AVENUE	MONTVALE NJ
MGR	VALESIO, JOSEPH V	100 SUMMIT AVENUE	MONTVALE NJ
MGR	Robert McGovern	One Merck Drive	Whitehouse Station, NJ
MGR	Michael Findling	One Merck Drive	Whitehouse Station, NJ
			DBL-12-97

FILED
 97 JUN 10 AM 10:30
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

11. I do 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 annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Robert B. McGovern Date 4/10/97 (908) 423-1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Daytime Phone #