## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 22, 2002 8:00 am Secretary of State DOCUMENT # M9600000458 05-22-2002 90223 034 \*\*\*\*50.00 MERCK-MEDCO MANAGED CARE, L.L.C. Principal Place of Business Mailing Address 100 PARSONS POND DRIVE MERCK & CO., INC. 966717 FRANKLIN LAKES NJ 07417 ONE MERCK DRIVE, W52F96 WHITEHOUSE STATION NJ 08889-0100 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 22-3461740 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE ☐ Delete TITLE CR2E083 (9/01 Change Addition DORSA, CAROLINE NAME NAME ONE MERCK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WHITEHOUSE STATION NJ 08889 CITY-ST-ZIP MGR ☐ Delete TITLE Change ☐ Addition NAME CLARK, RICHARD T NAME STREET ADDRESS 100 PARSONS POND DRIVE STREET ADDRESS CITY-ST-ZIP FRANKLIN LAKES NJ 07417 CITY-ST-ZIP MGR TITLE **⊠**Delete TITLE ☐ Change ■ Addition Senior Vice President NAME WEINSTEIN, BERT I NAME Robert J. Blyskal STREET ADDRESS ONE MERCK DR. STREET ADDRESS 100 Parsons Pond Drive Franklin Lakes NJ 07417 CITY-ST-ZIP WHITE HOUSE STATION NJ 08889 CITY-ST-ZIP MGR TITLE ☐ Delete ☐ Change Addition NAME **BOLLWAGE, DEBRAH** ONE MERCK DR. STREET ADDRESS STREET ADDRESS

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 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.

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WHITE HOUSE STATION NJ 08889

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4/24/02

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