

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23422

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** AMERISOURCEBERGEN DRUG CORPORATION

**Current Principal Place of Business:**

1300 MORRIS DRIVE  
CHESTERBROOK, PA 19087

**New Principal Place of Business:**

**Current Mailing Address:**

1300 MORRIS DRIVE  
CHESTERBROOK, PA 19087

**New Mailing Address:**

**FEI Number:** 23-2353106

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: VPCT  
Name: QUINN, J F  
Address: 1300 MORRIS DRIVE  
City-St-Zip: CHESTERBROOK, PA 19087

Title: D  
Name: YOST, R DAVID  
Address: 1300 MORRIS DRIVE  
City-St-Zip: CHESTERBROOK, PA 19087

Title: CFOD  
Name: DICANDILO, MICHAEL D  
Address: 1300 MORRIS DRIVE  
City-St-Zip: CHESTERBROOK, PA 19087

Title: AS  
Name: HIRST, DANIEL T  
Address: 1300 MORRIS DRIVE  
City-St-Zip: CHESTERBROOK, PA 19087

Title: DSGC  
Name: CHOU, JOHN G  
Address: 1300 MORRIS DRIVE  
City-St-Zip: CHESTERBROOK, PA 19087

I hereby 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 all other like empowered.

SIGNATURE: DANIEL T HIRST

AS

03/17/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date