

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000000669

FILED
Apr 16, 2012
Secretary of State

Entity Name: ACCREDO HEALTH GROUP, INC.

Current Principal Place of Business:

1640 CENTURY CENTER PKWY
SUITE 101
MEMPHIS, TN 38134

New Principal Place of Business:

Current Mailing Address:

1640 CENTURY CENTER PKWY
SUITE 101
MEMPHIS, TN 38134

New Mailing Address:

FEI Number: 11-3358535 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 ROAD
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: P/D
Name: HALL, JEFF
Address: ONE EXPRESS WAY
City-St-Zip: ST. LOUIS, MO 63121

Title: S
Name: AKINS, MARTIN
Address: ONE EXPRESS WAY
City-St-Zip: ST. LOUIS, MO 63121

Title: VP
Name: EBLING, KEITH
Address: ONE EXPRESS WAY
City-St-Zip: ST. LOUIS, MO 63121

Title: AS
Name: ELLIOTT, KELLEY
Address: ONE EXPRESS WAY
City-St-Zip: ST. LOUIS, MO 63121

Title: AS
Name: MCGINNIS, CHRIS
Address: ONE EXPRESS WAY
City-St-Zip: ST. LOUIS, MO 63121

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: KELLEY ELLIOTT

AS

04/16/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date