



FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90981 014 ***150.00

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000068779
 1. Entity Name
 41st Street CVS, Inc.  

DO NOT WRITE IN THIS SPACE

11022087

2. Principal Place of Business
 One CVS Drive
 Suite, Apt. #, etc.

3. Mailing Address
 One CVS Drive
 Suite, Apt. #, etc.
 Legal Department

DO NOT WRITE IN THIS SPACE

City & State
 Woonsocket RI

City & State
 Woonsocket RI

Zip
 02895

Country
 USA

4. FEI Number
 06-1593560

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

**DO NOT WRITE
 IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
 CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City
 Plantation

FL Zip Code
 33324

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

P/D
 Thomas M. Ryan
 One CVS Drive, Woonsocket RI 02895

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

V/S/D
 Zenon P. Lankowsky
 One CVS Drive, Woonsocket RI 02895

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

T
 Larry D. Solberg
 One CVS Drive, Woonsocket RI 02895

**DO NOT WRITE
 IN THIS SPACE**

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

AS
 Melanie K. Luker
 One CVS Drive, Woonsocket RI 02895

**DO NOT WRITE
 IN THIS SPACE**

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D
 Christopher W. Bodine
 One CVS Drive, Woonsocket RI 02895

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

AS
 Linda M. Cimbron
 One CVS Drive, Woonsocket RI 02895

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:  Melanie K. Luker 4-23-03 401-770-3565

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)