2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17113

Entity Name: T2 MEDICAL, INC.

Current Principal Place of Business:

ONE CVS DRIVE WOONSOCKET, RI 02895

Current Mailing Address:

ONE CVS DRIVE WOONSOCKET, RI 02895 US

FEI Number: 59-2405366

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US FILED Apr 02, 2024 Secretary of State 1974738689CC

Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Direc	to Detail.		
Title	DIRECTOR	Title	ASSISTANT TREASURER
Name	MOFFATT, THOMAS S.	Name	COLE, JOSHUA C.
Address	ONE CVS DRIVE	Address	ONE CVS DRIVE
City-State-Zip:	WOONSOCKET RI 02895	City-State-Zip:	WOONSOCKET RI 02895
Title	ASSISTANT SECRETARY	Title	ASSISTANT SECRETARY
Name	DEHNER, KEVIN M.	Name	SMITH, JOSHUA J.
Address	ONE CVS DRIVE	Address	ONE CVS DRIVE
City-State-Zip:	WOONSOCKET RI 02895	City-State-Zip:	WOONSOCKET RI 02895
Title	PRESIDENT/TREASURER	Title	DIRECTOR
Name	WEINERT, CRAIG S.	Name	WEINERT, CRAIG S.
Address	ONE CVS DRIVE	Address	ONE CVS DRIVE
City-State-Zip:	WOONSOCKET RI 02895	City-State-Zip:	WOONSOCKET RI 02895
Title	VICE PRESIDENT/SECRETARY	Title	ASSISTANT SECRETARY
Name	MOFFATT, THOMAS S.	Name	ST ANGELO, MELANIE K.
Address	ONE CVS DRIVE	Address	ONE CVS DRIVE
City-State-Zip:	WOONSOCKET RI 02895	City-State-Zip:	WOONSOCKET RI 02895

Continues on page 2

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: MELANIE K. ST ANGELO

AUTHORIZED SIGNOR

04/02/2024

Date

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ASSISTANT TREASURER
Name	BEAULIEU, SHEELAGH M.
Address	ONE CVS DRIVE
City-State-Zip:	WOONSOCKET RI 02895
Title	AUTHORIZED SIGNOR
Title Name	AUTHORIZED SIGNOR ST ANGELO, MELANIE K.

Title	ASSISTANT SECRETARY		
Name	DESOUSA, KIMBERLEY M.		
Address	ONE CVS DRIVE		
City-State-Zip:	WOONSOCKET RI 02895		