

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S85729

Entity Name: ECKERD CORPORATION OF FLORIDA, INC.

Current Principal Place of Business:

ONE CVS DRIVE
LEGAL DEPARTMENT
WOONSOCKET, RI 02895

Current Mailing Address:

ONE CVS DRIVE
LEGAL DEPARTMENT
WOONSOCKET, RI 02895 US

FEI Number: 59-3102662

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

Officer/Director Detail :

Title PD
Name MOFFATT, THOMAS S
Address ONE CVS DRIVE
City-State-Zip: WOONSOCKET RI 02895

Title S
Name LUKER, MELANIE K
Address ONE CVS DRIVE
City-State-Zip: WOONSOCKET RI 02895

Title DIRECTOR, VP, TREASURER
Name DENALE, CAROL A
Address ONE CVS DRIVE
City-State-Zip: WOONSOCKET RI 02895

Title ASST. TREASURER
Name CLARK, JEFFREY E
Address ONE CVS DRIVE
LEGAL DEPARTMENT
City-State-Zip: WOONSOCKET RI 02895

Title ASST. TREASURER
Name BEAULIEU, SHEELAGH M
Address ONE CVS DRIVE
City-State-Zip: WOONSOCKET RI 02895

Title ASST. SECRETARY
Name CIMBRON, LINDA M
Address ONE CVS DRIVE
LEGAL DEPARTMENT
City-State-Zip: WOONSOCKET RI 02895

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

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 LUKER

SECRETARY

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date