2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S85729

Entity Name: ECKERD CORPORATION OF FLORIDA, INC.

Current Principal Place of Business:

ONE CVS DRIVE

WOONSOCKET, RI 02895

Current Mailing Address:

ONE CVS DRIVE

WOONSOCKET, RI 02895 US

FEI Number: 59-3102662 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:

Name

Electronic Signature of Registered Agent

Date

FILED Apr 02, 2024

Secretary of State

5252902013CC

Officer/Director Detail:

Title DIRECTOR Title PRESIDENT

Name MOFFATT, THOMAS S. Name MOFFATT, THOMAS S. Address ONE CVS DRIVE Address ONE CVS DRIVE

City-State-Zip: WOONSOCKET RI 02895 City-State-Zip: WOONSOCKET RI 02895

Title SENIOR VICE PRESIDENT AND Title DIRECTOR

TREASURER

DENALE, CAROL A.

•

Address ONE CVS DRIVE City-State-Zip: WOONSOCKET RI 02895

Name

Address

City-State-Zip: WOONSOCKET RI 02895

Title SECRETARY

Name of ANCELO

Name ASSISTANT SECRETARY Name ST ANGELO, MELANIE K.

Name ASH, ELIZABETH

Address ONE CVS DRIVE

Address ONE CVS DRIVE City-State-Zip: WOONSOCKET RI 02895

City-State-Zip: WOONSOCKET RI 02895

Title ASSISTANT TREASURER Name SMITH, JOSHUA J.

Name COLE, JOSHUA C. Address ONE CVS DRIVE

Address ONE CVS DRIVE City-State-Zip: WOONSOCKET RI 02895

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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

DENALE, CAROL A.

ONE CVS DRIVE

04/02/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

TitleASSISTANT SECRETARYTitleAUTHORIZED SIGNORNameDEHNER, KEVIN M.NameST ANGELO, MELANIE K.

Address ONE CVS DRIVE Address ONE CVS DRIVE

City-State-Zip: WOONSOCKET RI 02895 City-State-Zip: WOONSOCKET RI 02895