



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
100 W. River Street
Providence, RI 02903-2415
(401) 222-3300

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2009

Filing Period: September 1 - November 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-16-66, Rhode Island limited liability companies are required to file this annual report with the SOS after the time period begins. R.I.G.L. 7-16-66(b) imposes a civil penalty for not filing of \$50.00.

1. FID No. 194028		2. Limited Liability Company Name MemberHealth LLC			
3. State of Formation Delaware		4. Brief description of the nature of the business or service Pharmacy benefit management			
5. Principal office address 29100 Aurora Road		City Solon		State OH	Zip 44139
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Marcy Utlak			Contact Title Sr. Regulatory Paralegal		
Street Address 29100 AURORA ROAD		City Solon		State OH	Zip 44139
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS FILL IN SPACES BEFORE USING ATTACHMENTS (X BOX FOR ATTACHMENT) ☐					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11					

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This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66(b).

File Date FILED
Check No. OCT 02 2009
By 100391
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person
September 10, 2009
Date
David S. Azzolina, CFO & Treasurer
Print or Type Name of Authorized Person