



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2013

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.
 Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>509306</u>		2. Exact name of the limited liability company <u>TheraCom, LLC</u>			
3. State of Formation <u>OH</u>		4. Brief description of the character of business conducted in Rhode Island <u>Pharmacy specialty services</u>			
5. Principal office address <u>One CVS Drive</u>			City <u>Woonsocket</u>	State <u>RI</u>	Zip <u>02895</u>
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name <u>Attn. Tax Dept</u>			Contact Title <u>AmerisourceBergen Corporation</u>		
Street Address <u>1300 Morris Drive</u>			City <u>Chesterbrook</u>	State <u>PA</u>	Zip <u>19087</u>
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
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 Form 642.					

FILED
 SEP 30 2013
 BY 2020256587

File Date _____
 Check No _____
 By: _____
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.

Daniel T. Hirst 9/27/13
 Signature of Authorized Person Date
Daniel T. Hirst
 Print or Type Name of Authorized Person

THERACOM, L.L.C.
an Ohio limited liability company

SOLE MEMBER

NAME	BUSINESS ADDRESS
AmerisourceBergen Holding Corporation, <i>a Delaware Corporation</i>	1300 Morris Drive Chesterbrook, PA 19087

OFFICERS (partial list)

NAME	TITLE	BUSINESS ADDRESS
Steven H. Collis	Chief Executive Officer	1300 Morris Drive Chesterbrook, PA 19087
Tracy Foster	President	Corporate Center Five 3735 Glen Lake Drive, Suite 300 Charlotte, NC 28208
John G. Chou	Executive Vice President, General Counsel & Secretary	1300 Morris Drive Chesterbrook, PA 19087
Tim G. Guttman	Senior Vice President & Chief Financial Officer	1300 Morris Drive Chesterbrook, PA 19087
J. F. Quinn	Vice President & Corporate Treasurer	1300 Morris Drive Chesterbrook, PA 19087
Daniel T. Hirst	Assistant Secretary	1300 Morris Drive Chesterbrook, PA 19087
Diana P. Dunphy	Assistant Secretary	1300 Morris Drive Chesterbrook, PA 19087

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SEP 30 2013

BY ID 509306