



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

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 18913		2. Name of Corporation Woonsocket Prescription Center, Incorporated			
3. Street Address Principal Business Office One CVS Drive			City Woonsocket	State RI	Zip 02895
4. Business Phone No. 401-765-1500		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island retail pharmacy					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Zenon P. Lankowsky			Vice President Name Carol A. DeNale		
Street Address One CVS Drive			Street Address One CVS Drive		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
Secretary Name Thomas S. Moffatt			Treasurer Name Carol A. DeNale		
Street Address One CVS Drive			Street Address One CVS Drive		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Zenon P. Lankowsky			Director Name Carol A. DeNale		
Street Address One CVS Drive			Street Address One CVS Drive		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
Director Name Thomas S. Moffatt			Director Name		
Street Address One CVS Drive			Street Address		
City Woonsocket	State RI	Zip 02895	City	State	Zip
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
250	common	npv	250	common	npv

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED
File Date MAR 03 2008
Check No. _____
By: 6296545
FOR SECRETARY OF STATE

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 Melanie K. Luker Date 2-28-08
Print or Type Name
Assistant Secretary
Title

As of 2/29/2008

Corporate Officers

Name: Zenon P. Lankowsky
Title: President
Bus Address: One CVS Drive
Woonsocket, RI 02895

Name: Carol A. DeNale
Title: Vice President/Treasurer
Bus Address: One CVS Drive
Woonsocket, RI 02895

Name: Thomas S. Moffatt
Title: Secretary
Bus Address: One CVS Drive
Woonsocket, RI 02895

Name: Jeffrey E. Clark
Title: Assistant Treasurer
Bus Address: One CVS Drive
Woonsocket, RI 02895

Name: Terence M. Corrigan
Title: Assistant Treasurer
Bus Address: One CVS Drive
Woonsocket, RI 02895

Name: Linda M. Cimbron
Title: Assistant Secretary
Bus Address: One CVS Drive
Woonsocket, RI 02895

Name: Melanie K. Luker
Title: Assistant Secretary
Bus Address: One CVS Drive
Woonsocket, RI 02895

FILED
MAR 03 2008
By 6296545
mnc

JD #18913