

1.) CORPORATION NAME:

Express Scripts Insurance Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

AZ

DUE DATE: **7/31/2011**

SCC ID NO: **F1795204**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE EXPRESS WAY

CITY/ST/ZIP: ST LOUIS, MO 63121-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	KEITH EBLING	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRE		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63121-		
NAME:	MATTHEW HARPER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREA		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63121-		
NAME:	EDWARD B IGNACZAK	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63121-		
NAME:	JEFFREY HALL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63121-		
NAME:	PATRICK ROBERT MCNAMEE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63121-		

NAME: KELLEY ELLIOTT TITLE: ASST SECRETARY ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: JEFFREY NAEGER TITLE: ASST SECRETARY ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: MARTIN P AKINS TITLE: ASST SECRETARY ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: EDWARD B IGNACZAK TITLE: CEO ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: BRIT PIM TITLE: COO ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: AARON MANWILL TITLE: DIRECTOR ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JEFFREY HALL TITLE: CFO ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ JEFFREY NAEGER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JEFFREY NAEGER, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE
7/15/2011 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	