

1.) CORPORATION NAME:

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

Express Scripts Insurance Company

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1795204**

CORPORATION SERVICE COMPANY

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

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:	EDWARD B IGNACZAK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
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:	VP/CFO		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63121		

NAME:	MARTIN P AKINS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63121		

NAME:	KELLEY ELLIOTT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST. LOUIS, MO 63121		

NAME:	KEITH EBLING	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
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:	VP/TREA		
ADDRESS:	ONE EXPRESS WAY		
CITY/ST/ZIP/CO:	ST LOUIS, MO 63121		

NAME: BRIT PIM TITLE: PRESIDENT ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST. LOUIS, MO 63121	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: PATRICK ROBERT MCNAMEE TITLE: DIRECTOR ADDRESS: ONE EXPRESS WAY CITY/ST/ZIP/CO: ST LOUIS, MO 63121	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ BRIT PIM	BRIT PIM,	4/6/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.