

License Number: 1000137	Current Date: 07/02/2025 03:46 PM
Name:	CVS PHARMACY INC
License Type:	Prescription Drug Distributor
License Status:	Current
Expiry Date:	07/02/2027
Effective Rank Date:	06/18/2009
Modifier(s):	Prescription
	Controlled Substance
	Wholesales Distributor

Addresses		
Mailing Address	Address	
		EUFEMIA T BRYDEN- COORDINATOR COROPORATE SERVICES WOONSOCKET , RI OUT OF STATE/UNKNOWN 02895 US
Physical Loc	Address	
		CVS PHARMACY INC 225 HARPERS LANDING BLVD CONROE , TX MONTGOMERY 77385 US

Food & Drug Owner		
Licensee's Role:		Food & Drug License
Related Party Role:		Food & Drug Owner
Related Party Name	License	Address
CVS PHARMACY INC	Owner #A053541 Status: Current Expiration Date:	WOONSOCKET , RI OUT OF STATE/UNKNOWN 02895