

No. C 34352	Annual Report Form Due No Later Than November 30, 1997		2. Registered Agent and Office NOT A P.O. BOX	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct SUPER THRIFT DRUGS, INC. SUZANNE S SEALS P.O. BOX 1019 400 N. Kings Rd. Ste #30 PARMA Nampa ID 83668 83687		A JAMES SEALS 208 HOLLY 400 N. Kings Rd St. #30 NAMPA ID 83686 83687	
* FIRST NOTICE *		3. Organized Under the Laws of: 83687 ID C 34352		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☐ Managers or ☐ Members (check one)				
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>
President	A James Seals	209 E. Andrews	Parma	ID 83060
V. President	Suzanne Seals	209 E. Andrews	Parma	ID 83660
Secretary	Jody Seely	3012 Hickory Dr.	Nampa	ID 83686
Director	Carolyn Cromer	5703 E. Locust Ln.	Nampa	ID 83686
5.		6. Signature <u>A. James Seals</u> Date _____ Name (Typed or Printed) <u>A. James Seals</u> Title <u>President/Owner</u>		

ISSUED: 07-04-1997 ↓ DO NOT TAPE OR STAPLE ↓

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