

No. C 113221		Due no later than Jan 31, 2010 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed. WALLACE PHARMACY, INC. DWIGHT D WALLACE PO BOX 841 ABERDEEN ID 83210		DWIGHT D WALLACE 44 S MAIN ABERDEEN ID 83210			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
SECRETARY	MISTY J WALLACE	568 S. 1ST W. PO BOX 841	ABERDEEN	ID	USA	83210	
PRESIDENT	DWIGHT D WALLACE	568 S. 1ST W. P.O. BOX 841	ABERDEEN	ID	USA	83210	
5. Organized Under the Laws of: ID C 113221		6. Annual Report must be signed.* Signature: Dwight Wallace Name (type or print): Dwight Wallace					
		Date: 11/16/2009 Title: President					
Processed 11/16/2009		* Electronically provided signatures are accepted as original signatures.					