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| No. C 121910 | Due no later than Dec 31, 2011 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. NEIGHBORHOOD PHARMACY, INC. (THE) TERREL COLLINS 16116 HOMEDALE RD CALDWELL ID 83607 | TERREL COLLINS 16116 HOMEDALE RD CALDWELL ID 83607 | |
| | | 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 | KATHLEEN ANN COLLINS | 16116 HOMEDALE RD | CALDWELL ID USA 83607 |
| PRESIDENT | TERREL A COLLINS | 16116 HOMEDALE RD | CALDWELL, ID USA 83607 |
| 5. Organized Under the Laws of: ID C 121910 | 6. Annual Report must be signed.* Signature: Kathleen Ann Collins Name (type or print): Kathleen Ann Collins | | Date: 01/15/2012 Title: Secretary |
| Processed 01/15/2012 | | * Electronically provided signatures are accepted as original signatures. | |