

No. C 36762	Annual Report Form <i>Due No Later Than November 30,</i> 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 WENDELL DRUG, INC. MARY RITA MILLER P. O. BOX 1251		MARY RITA MILLER 318 W. 3RD WENDELL ID 83355																				
	** FINAL NOTICE ** TWIN FALLS ID 83301		3. Organized Under the Laws of: ID C 36762																				
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																							
<table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>PRESIDENT</td> <td>MARY RITA MILLER</td> <td>PO BOX 367</td> <td>WENDELL</td> <td>ID</td> <td>83355</td> </tr> <tr> <td>DIRECTOR</td> <td>MARY RITA MILLER</td> <td>PO BOX 367</td> <td>WENDELL</td> <td>ID</td> <td>83355</td> </tr> </tbody> </table>						<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	PRESIDENT	MARY RITA MILLER	PO BOX 367	WENDELL	ID	83355	DIRECTOR	MARY RITA MILLER	PO BOX 367	WENDELL	ID	83355
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5. INVESTMENTS		6. Signature <u>Mary Rita Miller</u> Date <u>120197</u> Name <small>(Typed or Printed)</small> <u>MARY RITA MILLER</u> Title <u>PRESIDENT</u>																					

ISSUED: 10-04-1997

↓ DO NOT TAPE OR STAPLE ↓

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