No. <b>C 199613</b>		Due no later than Sep 30, 2015		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		Annual Report Form  1. Mailing Address: Correct in this box if needed.  NABP DISTRICT 7 INC.  C/O NICOLE L CHOPSKI  PO BOX 3005  POCATELLO ID 83206  USA		SAMUEL A HOAGLAND 702 W IDAHO ST STE 1100 BOISE ID 83702  3. New Registered Agent Signature:*											
								4. Corporations: Enter Na	mes and Busin	ess Addresses of Preside	ent, Secretary, and Directors. Treasurer	(optional).			
								Office Held	Name		Street or PO Address	City	State	Country	Postal Code
SECRETARY	NICOLE L CHOPSKI		13330 N MANNING LN	POCATELLO	ID	USA	83202								
PRESIDENT	MARCUS WATT		C/O OREGON BOARD OF PHARMACY 800 NE OREGON ST., SUITE 150	PORTLAND	OR	USA	97232-2162								
VICE PRESIDENT	MARK JOHNSTON		1683 E MYRTLE BEACH CT	EAGLE	ID	USA	83616								
DIRECTOR	Mark John:	STON	1683 E MYRTLE BEACH CT	EAGLE	ID	USA	83616								
5. Organized Under the Laws of: 6. Annual Rep		6. Annual Report must	be signed.*												
ID C 199613		Signature: NICOLE L CHOPSKI			Date: 09/23/2015										
		Name (type or print): NICOLE L CHOPSKI			Title: SECRETARY										
Processed 09/23/2015 * Electronically provided signatures are accepted as original signatures.															