No. C 85936	Annual Report Form 1997 Due No Later Than November 30,	2. Registered Agent and Office R MICHAEL S. HES	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON	1. Mailing Address - Please Correct, If Not Correct NORTHWEST PHARMACY SERVICES	619 S. WASHING	
PO BOX 83720 BOISE, ID 83720-0080	MICHAEL S. HESS 619 S. WASHINGTON		D 83843
NO FEE REQUIRED		3. Organized Under the Laws of	ft:
* FIRST NOTICE *	MOSCOW ID 83843	ID C	85936
Limited Liability Companies: Er	Business Addresses of President, Secretary and Directors ter Names and Addresses of Q Managers or Q Members		
Office held Name	Loils How TOF Visto	City State	<u>Zip</u> 63843
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5. 155UED: 07-04-	Signature Name (Typed or Printed)	Les Date Ja	1/97
5.	Signature Name (Typed or Printed)	Ves Date 7/2	1/97
5.	Signature Name (Typed or Printed)	Ves Date 7/2	1/97