No. C 75002	Due no later than Feb 28, 200	1	2 Periodo do
Return to:	Annual Report Form		2. Registered Agent and Office NO PO BOX
SECRETARY OF STATE	1. Mailing Address - Correct in this box if appli-	rahlo	C T CORPORATION SYSTEM
700 WEST JEFFERSON	MEDISAVE PHARMACIES, INC.	Jable	300 N. 6TH STREET
PO BOX 83720	TAX DEPT.		
BOIS€, ID 83720-0080	680 S FOURTH ST		BOISE, ID 83701
NO FILING FEE IF	LOUISVILLE, KY 40202		3. New Registered Agent Signature
RECEIVED BY DUE DATE			
Corporations: Enter Nam	nes and Business Addresses of President,	Coorate	100
Office hold		Secretary	and Directors.
Office held Name	Street or P.O. Address	City	State Zin
See Attached List			<u>State</u> <u>Zip</u>
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. Organized Under the Laws of:	6.		
		$1 \leq$	/ , ,
DELAWARE	Signature Mushaell	porcio	Date
C 75002	Name Printed) Michael E. Moas	· [Title:
·	Name Printed) Printed L. Illian	<u> </u>	XMINOS Vice President Tax
Issued 12/05/2000	Do Not Tape or Staple		
	- 1 and		235

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