

No. C 34789		Due no later than Aug 31, 2006		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. MEDICAL CLINIC PHARMACY, INC. TERRY COLLINS 315 ELM STE 150 CALDWELL ID 83605		TERREL COLLINS 16116 HOMEDALE RD CALDWELL ID 83605			
				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	
PRESIDENT	TERREL A COLLINS	16116 HOMEDALE RD	CALDWELL	ID	USA	83607	
SECRETARY	KATHLEEN A COLLINS	16116 HOMEDALE RD	CALDWELL	ID	USA	83607	
5. Organized Under the Laws of: IDAHO C 34789		6. Annual Report must be signed.* Signature: Kathleen A Collins Name (type or print): Kathleen A Collins Date: 09/06/2006 Title: Secretary					
Processed 09/06/2006		* Electronically provided signatures are accepted as original signatures.					