

No. C 60431

Due no later than February 29, 2008

## Annual Report Form

2. Registered Agent and Office NO PO BOX

Return to:

SECRETARY OF STATE  
450 NORTH FOURTH STREET  
PO BOX 83720  
BOISE, ID 83720-0080

1. Mailing Address - Correct in this box, if applicable

JACK'S PHARMACY INCORPORATED  
CHAD M BROWN  
103 E COLLEGE AVE  
ST. MARIES, ID 83861

CHAD M BROWN  
317 CHRISTMAS HILLS RD  
ST. MARIES, ID 83861

3. New Registered Agent Signature

NO FILING FEE IF  
RECEIVED BY DUE DATE

4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.

Office held	Name	Street or P.O. Address	City	State	Zip
President	CHAD M BROWN	103 E College Av	St. Maries	Id	83861
Secretary	LISA D BROWN	103 E. College Av	St. Maries	Id	83861
Director	CHAD M BROWN	103 E college Av	St. Maries	Id	83861
Director	LISA D. BROWN	103 E College Av	St. Maries	Id	83861

5. Organized Under the Laws of:  
IDAHO  
C 60431

6.

Signature



Date

12-12-2007

Name (Typed or Printed)

CHAD M BROWN

Title

President

Issued 12/03/2007

Do Not Tape or Staple

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