

No. C 91340	Due no later than Jan 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address - Correct in this box, if applicable NORTHWEST VALUE PHARMACIES, INC. RON HEMBERRY 13010 HWY 12		RON HEMBERRY 13010 HWY 12		
NO FILING FEE IF RECEIVED BY DUE DATE	OROFINO, ID 83544		OROFINO, ID 83544		
3. New Registered Agent Signature					
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
Pres.	Ron Hemberry	2706 Sunset Dr	Lewiston	ID	83501
Sec/Tres	Kathleen Hemberry	2706 Sunset Dr	Lewiston	ID	83501
5. Organized Under the Laws of:		6.			
IDAHO C 91340		Signature: <u>Kathleen Hemberry</u> Name <small>(Typed or Printed)</small> <u>KATHLEEN HEMBERRY</u>		Date <u>12/1/2000</u> Title: <u>Sec/Treas</u>	