

No. <b>C 152476</b>	<b>Due no later than Jan 31, 2011</b> <b>Annual Report Form</b>	2. Registered Agent and Address <b>(NO PO BOX)</b>				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>	<b>1. Mailing Address: Correct in this box if needed.</b> WALGREENS HEALTH INITIATIVES, INC. STAN TYLKA 300 WILMOT ROAD, MS #3301 DEERFIELD IL 60015 USA	CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA				
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).		3. <u>New</u> Registered Agent Signature:*				
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	K. CRAWFORD	200 WILMOT ROAD	DEERFIELD	IL	USA	60015
DIRECTOR	R. J. HANS	200 WILMOT ROAD	DEERFIELD	IL	USA	60015
SECRETARY	R. M. SILVERMAN	104 WILMOT ROAD	DEERFIELD	IL	USA	60015
PRESIDENT	K. CRAWFORD	200 WILMOT ROAD	DEERFIELD	IL	USA	60015
TREASURER	MARGARITA E KELLEN	300 WILMOT ROAD	DEERFIELD	IL	USA	60015
5. Organized Under the Laws of: <b>IL</b> <b>C 152476</b>	6. Annual Report must be signed.* Signature: Michael Felish Name (type or print): Michael Felish		Date: 01/20/2011 Title: Assistant Treasurer			
Processed 01/20/2011		* Electronically provided signatures are accepted as original signatures.				