No. C 53858		Due no later than Jul 31, 2016 Annual Report Form 1. Mailing Address: Correct in this box if needed. OSBURN DRUG COMPANY DALE B LAVIGNE PO BOX 2170 OSBURN ID 83849		2. Registered A	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				305 LARCH	DALE B LAVIGNE 305 LARCH STREET OSBURN ID 83849 3. New Registered Agent Signature:*			
				3. <u>New</u> Registe				
4. Corporations: Enter Nan	nes and Busin	ess Addresses of	President, Secretary, and Directors. Treas	urer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR SECRETARY PRESIDENT	DALE B. LAN THOMAS C. RONALD D.	KILBOURNE	305 LARCH ST. 106 S. 1ST. ST. P.O. BOX 698	OSBURN OSBURN OSBURN	ID ID ID	USA USA USA	83849 83849 83849	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID C 53858		Signature: Da Name (type o		Date: 07/22/2016 Title: director				
Processed 07/22/2016	* Electronically provided signatures are accepted as original signatures.							