

No. C 89316 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 218 BOULDER CO 80501-0218 BULDER CO 80501-0080 NO FEE REQUIRED ** FINAL NOTICE **	Annual Report Form Due No Later Than November 30, Mailing Address - Please Correct, If Not Correct PENNY WISE DRUG STORES, INC. THOMAS M. WILSON P. O. BOX 278 CALDWELL ID 83605	2. Registered Agent and Office NOT A P.O. BOX THOMAS M. WILSON 802 CLEVELAND CALDWELL ID 83605 3. Organized Under the Laws of: ID C 89316																																				
4. Corporate Officers Enter Names and Addresses of President, Secretary and Directors Limited Liability Company Enter Names and Addresses of ☐ Managers or ☐ Members (check one)																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Office held</th> <th style="text-align: left;">Name</th> <th style="text-align: left;">Street or P.O. Address</th> <th style="text-align: left;">City</th> <th style="text-align: left;">State</th> <th style="text-align: left;">Zip</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Robert M Wilson</td> <td>3409 Colorado</td> <td>Caldwell</td> <td>Id</td> <td>83605</td> </tr> <tr> <td>Vice Pres</td> <td>James M Wilson</td> <td>1502 Arlington</td> <td>Caldwell</td> <td>Id</td> <td>83605</td> </tr> <tr> <td>Sec/Treas</td> <td>Thomas M Wilson</td> <td>1620 E Amity</td> <td>Nampa</td> <td>Id</td> <td>83686</td> </tr> <tr> <td>Chairman</td> <td>William L Wilson</td> <td>419 Windsor Dr</td> <td>Caldwell</td> <td>Id</td> <td>83605</td> </tr> <tr> <td>Director</td> <td>Helen M Wilson</td> <td>419 Windsor Dr</td> <td>Caldwell</td> <td>Id</td> <td>83605</td> </tr> </tbody> </table>	Office held	Name	Street or P.O. Address	City	State	Zip	President	Robert M Wilson	3409 Colorado	Caldwell	Id	83605	Vice Pres	James M Wilson	1502 Arlington	Caldwell	Id	83605	Sec/Treas	Thomas M Wilson	1620 E Amity	Nampa	Id	83686	Chairman	William L Wilson	419 Windsor Dr	Caldwell	Id	83605	Director	Helen M Wilson	419 Windsor Dr	Caldwell	Id	83605	5. NATURE OF BUSINESS DRUG STORE	
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6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature <u>Thomas M Wilson</u> Date <u>11-29-96</u> Name (Typed or Printed) <u>Thomas M Wilson</u> Title <u>Sec/Treas</u>		ISSUED: 10-05-1996																																				

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