

No. **C 85936**

**Due no later than February 28, 2006**  
**Annual Report Form**

Return to:  
**SECRETARY OF STATE**  
700 WEST JEFFERSON  
PO BOX 83720  
BOISE, ID 83720-0080

**NO FILING FEE IF  
RECEIVED BY DUE DATE**

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

**NORTHWEST PHARMACY SERVICES, INC.**  
MICHAEL S HESS  
619 S. WASHINGTON STE 102  
MOSCOW, ID 83843

2. Registered Agent and Office **NO PO BOX**

MICHAEL S HESS  
619 S. WASHINGTON  
MOSCOW, ID 83843

3. New Registered Agent Signature

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

Office held      Name

PRESIDENT      MICHAEL S. HESS  
SECRETARY      JANICE K. HESS

Street or P.O. Address

3109 W TWIN RD  
3109 W TWIN RD

City

MOSCOW

State

ID

Zip

83843

83843

5. Organized Under the Laws of:

**IDAHO**  
**C 85936**

6.

Signature

Name (Typed or  
Printed)

*Michael S. Hess*

Date 12/14/2005

Title PRESIDENT

200502006058