No. C 53858	Annual Report Form  1. Mailing Address - Correct in this box. if applicable USBURN DRUG COMPANY DALE B. LAVIGNE BOX A		2. Registered Agent and Office NO PO BOX DALE B LAVIGNE 305 LARCH STREET OSBURN, ID 83849	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON				
PO BOX 83720 BOISE, ID 83720-0080				
NO FILING FEE IF RECEIVED BY DUE DATE	OSBURN, ID 83849	3. <u>New</u>	Registered Ag	ent Signature
4. Corporations: Enter Na	nes and Business Addresses of Pr	esident, Secretary and I	Directors.	
Office held Name	Street or P.O. Address	<u>City</u>	State	<u>Zip</u>
President: Ronald Secretary: Thomas Chairman: Dale B. Directors: Lewis I	Kilbourne 106 S. 1s Lavigne 305 Larch	t.St. Osburn St. Osburn	ID ID	83849 83849 83849
	Montgomer	y Gulch Kellogg	g ID	83837
5. Organized Under the Laws of: IDAHO C 53858	6. Signature Name Printed) Da1e	B. Lavigne	Title:	-10-01 airman
	<del></del>			