

No. C 70306		Due no later than Jul 31, 2007		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		Annual Report Form 1. Mailing Address: Correct in this box if needed. TETON CLINICAL PHARMACY, INC. WINSTON V BEARD 2105 CORONADO IDAHO FALLS ID 83404-7495		WINSTON V BEARD 2105 CORONADO IDAHO FALLS ID 83404-7495		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
PRESIDENT	NEIL GRIGGS	2001 S. WOODRUFF	IDAHO FALLS	ID	USA	83404
SECRETARY	GINNY GRIGGS	2001 S. WOODRUFF	IDAHO FALLS	ID	USA	83404
DIRECTOR	PAT NOBLE	482 CONSTITUTION WAY	IDAHO FALLS	ID	USA	83404
DIRECTOR	NEIL GRIGGS	2001 S. WOODRUFF	IDAHO FALLS	ID	USA	83404
DIRECTOR	GINNY GRIGGS	2001 S. WOODRUFF	IDAHO FALLS	ID	USA	83404
DIRECTOR	FLOYD R HILL	2001 S. WOODRUFF	IDAHO FALLS	ID	USA	83404
5. Organized Under the Laws of: IDAHO C 70306		6. Annual Report must be signed.* Signature: Winston Beard Name (type or print): Winston Beard Date: 05/14/2007 Title: Registered Agent				
Processed 05/14/2007		* Electronically provided signatures are accepted as original signatures.				