

No. C 34352	Annual Report Form 1996 Due No Later Than November 30,		2. Registered Agent and Office NOT A P.O. BOX
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	1. Mailing Address - Please Correct, If Not Correct SUPER THRIFT DRUGS, INC. SUZANNE S SEALS P.O. BOX 1019 PARMA ID 83660		A JAMES SEALS 208 HOLLY NAMPA ID 83686 3. Organized Under the Laws of: ID C 34352
* FIRST NOTICE *			

4. Corporations: Enter Names and Addresses of **President, Secretary and Directors**
 Limited Liability Companies: Enter Names and Addresses of ☐ **Managers** or ☐ **Members** (check one)

Office held	Name	Street or P.O. Address	City	State	Zip
President	A. James Seals	209 E Andrews	Parma	IO	83660
Vice President	Suzanne Seals	209 E Andrews	Parma	IO	83660
Soc-Treasurer	Jody Seely	2125 Hickory	Nampa	IO	83686
Board Member	Carolyn Cramer	5703 E Locust	Nampa	IO	83686

5. NATURE OF BUSINESS RETAIL PHARMACY	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><i>Suzanne S. Seals</i></u> Date <u>1/15/96</u> Name (Typed or Printed) <u>Suzanne S. Seals</u> Title <u>V-President</u>
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ISSUED: 07-06-1996

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