

No. C 34352

Annual Report Form
Due No Later Than November 30, 1996

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

2. Registered Agent and Office **NOT A P.O. BOX**

A JAMES SEALS
 208 HOLLY
 NAMPA ID 83686

3. Organized Under the Laws of:

* FIRST NOTICE * **PARMA** **ID 83650**

ID **C 34352**

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

Limited Liability Companies: Enter Names and Addresses of Managers or Members (check one)

| <u>Office held</u> | <u>Name</u> | <u>Street or P.O. Address</u> | <u>City</u> | <u>State</u> | <u>Zip</u> |
|--------------------|----------------|-------------------------------|-------------|--------------|------------|
| President | A. James Seals | 209 E Andrews | Parma | IO | 83660 |
| Vice President | Suzanne Seals | 209 E Andrews | Parma | IO | 83660 |
| Sec-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 Suzanne S. Seals Date 1/15/96
 Name (Type or Printed) Suzanne S. Seals Title V-President

ISSUED: 07-06-1996

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