

Due no later than February 28, 2009

Annual Report Form

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

Return to:
 SECRETARY OF STATE
 450 NORTH FOURTH STREET
 PO BOX 83720
 BOISE, ID 83720-0080

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

JACK'S PHARMACY INCORPORATED
 CHAD M BROWN
 103 E COLLEGE AVE
 ST. MARIES, ID 83861

CHAD M BROWN
 317 CHRISTMAS HILLS RD
 ST. MARIES, ID 83861

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

3. New Registered Agent Signature

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

<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
President	Chad Brown	103 E. College Ave	St. Maries	ID	83861
Secretary	Lisa Brown	103 E. College Ave	St. Maries	ID	83861
Director	Chad Brown	103 E. College Ave	St. Maries	ID	83861
Director	Lisa Brown	103 E. College Ave	St. Maries	ID	83861

5. Organized Under the Laws of:

IDAHO
 C 60431

6.

Signature



Date

12/10/2008

Name (Typed or Printed)

CHAD M BROWN

Title

President

Issued 12/01/2008

Do Not Tape or Staple

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