No. C 8593	36	Due no later than February 28, 2009		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET 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 applicable  NORTHWEST PHARMACY SERVICES, INC.  MICHAEL S HESS 619 S. WASHINGTON STE 102  MOSCOW, ID 83843		MICHAEL S HESS 619 S. WASHINGTON MOSCOW, ID 83843  3. New Registered Agent Signature	
		es and Business Addresses of Pre	esident, Secretary and	Directors.	
Office held	Name	Street or P.O. Address	City	State	<u>Zip</u>
PRESIDENT	WILLIAM O.E.	WARDS 1625 E. I DA 40 AVE	PALOUSE	WA	99161
SECRETARY	MICHAELS.	WARDS 1625 E. IDA 40 AVE less 3109 W. TWIN RD	Moseow	10	83843
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5. Organized Under the Laws of: IDAHO C 85936		6. Signature		•	•
Issued 12/01/2008		Do Not Tape or	Staple	20090	2000821