

No. <b>C 204678</b>		<b>Due no later than Jan 31, 2016</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		<b>1. Mailing Address: Correct in this box if needed.</b>  ACARIAHEALTH PHARMACY #11, INC. 7700 FORSYTH BLVD ST. LOUIS MO 63105		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
<b>NO FILING FEE IF RECEIVED BY DUE DATE</b>				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	DONALD HOWARD	7700 FORSYTH BLVD	ST. LOUIS	MO	USA	63105	
SECRETARY	JASON M. HARROLD	7700 FORSYTH BLVD	ST. LOUIS	MO	USA	63105	
TREASURER	STEPHEN JENSEN	7700 FORSYTH BLVD	ST. LOUIS	MO	USA	63105	
DIRECTOR	JEFFREY FISHER	7700 FORSYTH BLVD	ST. LOUIS	MO	USA	63105	
5. Organized Under the Laws of:  <b>TX</b> <b>C 204678</b>		6. Annual Report must be signed.*  Signature: Michelle Donato Name (type or print): Michelle Donato					
		Date: 12/08/2015 Title: POA					
Processed 12/08/2015		* Electronically provided signatures are accepted as original signatures.					