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95 MAY -1 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Morfitt
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P15366 (8)
 1. Corporation Name
OSCO DRUG, INC.

Principal Place of Business Mailing Address
3030 CULLERTON DRIVE **3030 CULLERTON DRIVE**
LICENSE DEPARTMENT **LICENSE DEPARTMENT**
FRANKLIN PARK IL 60131 **FRANKLIN PARK IL 60131**

2. Principal Place of Business 2a. Mailing Address
21 709 E. South Temple **26 P.O. Box 27447**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
22 **27**
 City & State City & State
23 Salt Lake City, UT **28 Salt Lake City, UT**
 Zip Zip Country
24 84102 **25** **29 84127-0447** **30**

DO NOT WRITE IN THIS SPACE.
 3. Date Incorporated or Qualified 3a. Date of Last Report
07/28/1987 **05/01/1994**
 4. FEI Number Applied For
74-2462472 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing \$5.00 May Be Added to Fees
 Trust Fund Contribution
 8. This corporation has liability for intangible tax under § 193.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **85 Zip Code**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ SIGNATURE TYPED OR PRINTED NAME OF REGISTERED AGENT AND TITLE IF APPLICABLE _____ (PRINT) Registered Agent signature required when registering _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	1 TITLE	AS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, LARRY D.	12 NAME	Larry D. Anderson
STREET ADDRESS	1818 SWIFT DRIVE	13 STREET ADDRESS	420 E. South Temple
CITY- ST- ZIP	OAK BROOK IL	14 CITY- ST- ZIP	Salt Lake City, UT 84111
TITLE	D	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAHER, DAVID L.	22 NAME	
STREET ADDRESS	709 E. SOUTH TEMPLE	23 STREET ADDRESS	
CITY- ST- ZIP	SALT LAKE CITY UT	24 CITY- ST- ZIP	
TITLE	V	31 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARNTZEN, DAVID M.	32 NAME	David M. Arntzen
STREET ADDRESS	3030 CULLERTON DRIVE	33 STREET ADDRESS	709 E. South Temple
CITY- ST- ZIP	FRANKLIN PARK IL	34 CITY- ST- ZIP	Salt Lake City, UT 84102
TITLE	T	41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SEARL, ALEXANDE L.	42 NAME	Neal J. Rider
STREET ADDRESS	709 E. SOUTH TEMPLE	43 STREET ADDRESS	709 E. South Temple
CITY- ST- ZIP	SALT LAKE CITY UT	44 CITY- ST- ZIP	Salt Lake City, UT 84102
TITLE	D	51 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUND, VICTOR L.	52 NAME	Victor L. Lund
STREET ADDRESS	709 E. SOUTH TEMPLE	53 STREET ADDRESS	709 E. South Temple
CITY- ST- ZIP	SALT LAKE CITY FL	54 CITY- ST- ZIP	Salt Lake City, UT 84102
TITLE	D	61 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEL SANTO, LAWRENCE A.	62 NAME	Robert P. Hermanns
STREET ADDRESS	6300 CLARK AVE	63 STREET ADDRESS	709 E. South Temple
CITY- ST- ZIP	DUBLIN CA	64 CITY- ST- ZIP	Salt Lake City, UT

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Paul W. Eldridge* Paul W. Eldridge 4/20/95 (801) 320-3513
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Print)

See attached list for additional Officers & Directors

95366

03/28/95

Officers and Directors

OSCO DRUG, INC.

<u>Name</u>	<u>Title</u>	<u>Business</u>
Anderson, Larry	Assistant Secretary	420 East South Temple Salt Lake City, UT 84111
Arntzen, David M.	Vice President	709 East South Temple Salt Lake City, UT 84102
Beck, Teresa	Vice President	709 E. South Temple Salt Lake City, UT 84102
Caffarelli, James A.	Assistant Treasurer	3030 Cullerton Drive Franklin Park, IL 60131
Eldridge, Paul W.	Vice President	420 East South Temple Salt Lake City, UT 84111
Enyeart, A. Lynn	Assistant Treasurer	709 E. South Temple Salt Lake City, UT 84102
Hermanns, Robert P.	Director	709 E. South Temple Salt Lake City, UT 84102
Lund, Victor L.	Chairman President	709 E. South Temple Salt Lake City, UT 84102
Lunt, Jack	Vice President Assistant Secretary	444 East First South Salt Lake City, UT 84111
Maher, David L.	Director	709 E. South Temple Salt Lake City, UT 84102
Rider, Neal J.	Treasurer	709 E. South Temple Salt Lake City, UT 84102
Schneider, Mark N.	Vice President	709 East South Temple Salt Lake City, UT 84102
Sloan, Mary V.	Secretary	709 E. South Temple Salt Lake City, UT 84102
Vierig, Bradley M.	Vice President	709 E. South Temple Salt Lake City, UT 84102