

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P15366

1. Entity Name

OSCO DRUG, INC.

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90038 025 ***150.00

Principal Place of Business

299 SOUTH MAIN STREET
SALT LAKE CITY UT 84111
US

Mailing Address

ATTN: TAX DEPARTMENT
P O BOX 27447
SALT LAKE CITY FL 84127-0447
US

2. Principal Place of Business

250 Park Center Blvd

3. Mailing Address

P.O. Box 20

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boise

City & State

Boise

4. FEI Number

74-2462472

Applied For

Not Applicable

Zip

83706

Country

Zip

83726

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE AS ☐ Delete
NAME ANDERSON, LARRY D.
STREET ADDRESS 420 E. SOUTH TEMPLE
CITY-ST-ZIP SALT LAKE CITY UT

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME MAHER, DAVID L
STREET ADDRESS 709 E. SOUTH TEMPLE
CITY-ST-ZIP SALT LAKE CITY UT

TITLE Dir ☐ Change ☒ Addition
NAME Thomas R. Saldin
STREET ADDRESS 250 Park Center Blvd.
CITY-ST-ZIP Boise, ID 83706

TITLE V ☒ Delete
NAME ELDRIDGE, PAUL W
STREET ADDRESS 299 SOUTH MAIN STREET
CITY-ST-ZIP SALT LAKE CITY UT 84111

TITLE V/P ☐ Change ☒ Addition
NAME Bradley M. Vierig
STREET ADDRESS 299 South Main Stree
CITY-ST-ZIP Salt Lake City, UT 84111

TITLE T ☒ Delete
NAME SPENCER, GREG J
STREET ADDRESS 709 E SOUTH TEMPLE
CITY-ST-ZIP SALT LAKE CITY UT

TITLE T ☐ Change ☐ Addition
NAME John F. Boyd
STREET ADDRESS 250 Park Center Blvd.
CITY-ST-ZIP Boise, ID 83706

TITLE PD ☒ Delete
NAME LUND, VICTOR L
STREET ADDRESS 709 E. SOUTH TEMPLE
CITY-ST-ZIP SALT LAKE CITY FL

TITLE Pres ☐ Change ☒ Addition
NAME Gary G. Michael
STREET ADDRESS 250 Park Center Blvd.
CITY-ST-ZIP Boise, ID 83706

TITLE D ☒ Delete
NAME SCHOLTENS, MARTIN A
STREET ADDRESS 709 E SOUTH TEMPLE
CITY-ST-ZIP SALT LAKE CITY UT

TITLE Dir ☐ Change ☒ Addition
NAME Michael F. Reuling
STREET ADDRESS 250 Park Center Blvd.
CITY-ST-ZIP Boise, ID 83706

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Bradley M. Vierig*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)