

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P38207 (7)

1. Corporation Name

OSCO DRUG OF TEXAS, INC.



Principal Place of Business

709 E. SOUTH TEMPLE
SALT LAKE CITY UT 84102
US

Mailing Address

PO BOX 27447
SALT LAKE CITY UT 84127
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/03/1992

3a. Date of Last Report

05/01/1995

4. FEI Number

36-3770960

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

CT CORPORATION SYSTEM
1200 SOUTH 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 not applicable

NOTE: Registered Agent Signature required when not applicable

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE

AS

☐ DELETE

NAME

ANDERSON, LARRY D
420 E. SOUTH TEMPLE
SALT LAKE CITY UT

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

☒ DELETE

NAME

ARNTZEN, DAVID M
709 E. SOUTH TEMPLE
SALT LAKE CITY UT

STREET ADDRESS

CITY - ST - ZIP

TITLE

T

☐ DELETE

NAME

RIDER, NEAL J.
709 E. SOUTH TEMPLE
SALT LAKE CITY UT

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

☐ DELETE

NAME

ELDRIDGE, PAUL W.
420 E. SOUTH TEMPLE
SALT LAKE CITY UT

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

☐ DELETE

NAME

BECK, TERESA
709 E. SOUTH TEMPLE
SALT LAKE CITY UT

STREET ADDRESS

CITY - ST - ZIP

TITLE

AS

☐ DELETE

NAME

LUNT, JACK
444 E. 100 SOUTH
SALT LAKE CITY UT

STREET ADDRESS

CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul W. Eldridge

4/29/96

(801)320-3200

CR2E034 (12/95)

5/1/96