

* FILE NOW. FILING FEE AFTER MAY 1 IS \$225.00 *

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 MAY -2 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name WALGREEN DRUGS INC	DOCUMENT # A3000005700
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Mailing Address 300 WILMOT RD DEERFIELD IL 60015	Principal Place of Business
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If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. Mailing Address 21	2a. Principal Place of Business 26
3. Suite, Apt. #, etc. 22	3a. Suite, Apt. #, etc. 27
4. City & State 23	4a. City & State 28
5. Zip 24	5a. Zip 29
6. Country 25	6a. Country 30

DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified 12/15/93	3a. Date of Last Report 4/28/94
4. FEI Number 36-3026247	Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐
7. Nonprofit Exempt from \$138.75 Supplemental Fee ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent PRENTICE - HALL CORPORATION SYSTEM 1201 HAYS STREET, SUITE 105 TALLAHASSEE, FL 32301	
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10. Name and Address of New Registered Agent	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	85. Zip Code FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
1.1 TITLE SEE	
1.2 NAME RIDER	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes, 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J. H. LEVIN J. H. LEVIN - TREAS 4/28/95
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Signature/Name)

WALGREEN OSHKOSH, INC.

Officers & Directors

<u>Name</u>	<u>Title</u>	<u>Residence Address</u>
John R. Brown	President	1495 Lake Shore Ct. Barrington, IL 60010
Tom Stedman	Vice President	25 Ashbury Lane Barrington Hills, IL 60010
*Alan M. Resnick	Vice President	1822 Smith Road Northbrook, IL 60062
Joel H. Levin	Treasurer	1030 Sunsent Court Deerfield, IL 60015 (Mailing Address): 300 Wilmot Road Deerfield, IL 60015
*Edward H. King	Secretary	350 Taylor Court Vernon Hills, IL 60062 (Mailing Address): P.O. Box 302 Deerfield, IL 60015
Richard C. Hildebrandt	Assistant Secretary	503 E. Lynnwood Arlington Heights, IL 60004
*Julian A. Oettinger	Director	200 Wilmot Road Deerfield, IL 60015 (Mailing Address): P.O. Box 901 Deerfield, IL 60015

*Indicates Director

10-27-93