

By

FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State Corporations Division 100 North Main Street, Providence, Rt 02903-1335 401 222.3040

PROFIT CORPO	RATION A	NNUAL REP	ORT FOR THE	YEAR 2005	
(FORM MUST BE TYPED IN B			+		
1. Curporate ID No.	2. Name of Corpora	otion			
11695		PHARMACY, INC.			
3. Street Address Principal Busin			City	State	Zip
10 NEWPORT AVENUE	~		PAWTUCKET	RI	02861
4. Business Phone No		5. State of Incorpora	 		
401-722-7600		RHODE ISLAN			6 SIC Code 3277
7. Brief Description of the Chara	cter of Business Cond			·	3277
	· · · · · · · · · · · · · · · · · · ·				
i 8. NAMES AND ADDRESS [President Name	SES OF THE OFFI	CERS ("X" BOX FOR	ATTACHMENT) FILL IN SP.	ACES BEFORE USING AT	TACHMENTS
DAVID C. SIMPSON			. Vice President Name . Nancy L. Sa	impson	
Street Address					
74 PEQUOT ROAD			Sireei Address . 74 Pequot Ro	ad	
Cin Cin	Ton		<u>- </u>		
PAWTUCKET	State RI	Zip	City	State RI	^{7.ip} 02861
Secretary Name	1	02861	Pawtucket Treasurer Name		
Carol L. Smith			: Chenyl A. Si	Loukides	
Street Address	·				
19 York Road			*Street Address * 515 Pine Sa	troot	
City	16	T			
Mansfield	State MA	02048	:Ciry Seekonk	State MA	Zip 02771
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Director Name	ES OF THE DIKE	CIOKS ("X "BOX FO	Director Name	PACES BEFORE USING A	TTACHMENTS
DAVID C. SIMPSON			•	••	
Street Address		······································	NANCY L. SIMPSO	N	
74 PEQUOT ROAD			Street Address		
City	1.		74 PEQUOT ROAD		
PAWTUCKET	State	Zip	·City	State	Zip
Director Name	RI	02861	PAWTUCKET	RI	02861
Director Name			Director Name		
Street Address	·	···			
Sireti hudiess			*Street Address		
City	State	Zip	·Ciry	Τα	· · · · · · · · · · · · · · · · · · ·
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AUTHORIZED SHARES	U ("A BOX FORA	TACHMENT) U		" BOX FOR ATTACHMENT) U
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1,000 COMM NO PAR V	ALUE	×	50	A COMMON	NO PAR VALUE
					
			148	B COMMON	NO PAR VALUE
ru:-					
l'his report must be signed	in ink by either	the President, Vice	President, Secretary, Assis	tant Secretary, Treasur	er, Receiver or Trustee
				·	
DI HERRI FRANCA OFFIN	(B)&I BII				
FI HOUR HIRM KIND					
1 1 6 5	, ,			ury, I declare and affirm th	
	·	_	this report, including	any accompanying schedu	les and statements,
11695 DBC 01/06/06-0	9;22:33 AM		and that all statement	s contained herein are true	and correct.
File Date	<i>)</i> '	}	V/2 -11	A	7/2/05
	2005 /2 0-		Signalitie of Officer	Jun Park	70105
Check No. FEB 2 4	2005 2025	1		IMPEON	it.
	4 1		DAVID C. S.	IIVIPOUN	

Print or Type Name of Officer

Form 630 12/01

PRESIDENT

Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335

401.222.3040

2004 PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1 - March 1 Filing Fee: \$50.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 1. Corporate ID No. 2. Name of Corporation 11695 SIMPSON'S PHARMACY, INC. 3 Street Address Principal Business Office State ZΙρ 10 NEWPORT AVENUE PAWTUCKET RI 02861 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401**-**722-7600 RHODE ISLAND 3277 7 Brief Description of the Character of Business Conducted in Rhode Island **PHARMACY** ☐ FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) President Name Vice President Name DAVID C. SIMPSON Street Address Street Address <u>74 PEQUOT ROAD</u> City Zip City State Zip ..02861..PANTUCKET... ...RI..... Secretary Name Treasurer Name NANCY L. SIMPSON DAVID STMPSON Siner Address Street Address PEOUOT ROAD PEOUOT ROAD City State Z.ip State Z!p 02861 02861 RI PAWTUCKET RI 9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name <u>DAVID C. SIMPSON</u> Street Address Street Address <u>74 PEQUOT R</u>OAD City State Z.Ip City State Zip 02861 PAWTUCKET RI Director Name Director Name NANCY L. SIMSON Street Address Street Address PEQUOT ROAD City State Zip City State Z.ip PAWTUCKET 02861 RI 10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) **AUTHORIZED SHARES ISSUED SHARES** Number of Shares Class/Series Par Value Number of Shares Class/Series Par Value 1,000 COMM NO PAR VALUE 50 NO PAR VAL COMMON 148 **B** COMMON PAR VAL This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date Check No.	9.9.03
<i>Ry:</i>	OR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm	that I have examined this report.
including any accompanying schedules and s	
contained herein are thus and correct.	
Signature of Officer	Date
DAVID C. SIM	PSON
Print or Type Name of Officer	
Title of Officer	Form 620 Pay 12/03



Check No.

FOR SECRETARY OF STATE USE ONLY

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State

Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RJ 02903-1335 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: Januar		Filing Fee: \$50.00			
FORM MUST BE TYPED 1. Corporate ID No.	2. Name of Corp				
11695		S PHARMACY, INC.			
3. Street Address Principal 10 NEWPORT AVE			City PAWTUCKET	State RI	Zip 02861
4. Business Phone No.	· · · · · · · · · · · · · · · · · · ·	5. State of Incorpora	ation		6. SIC Code
4017227600		RHODE ISLA			3277
7. Brief Description of the PHARMACY	Character of Business Co	onducted in Rhode Island	· · · · · · · · · · · · · · · · · · ·		
8.NAMES AND ADD	RESSES OF THE OF	FICERS (FXT BOX FOR	MTACHMENT) IFILIANS	PACES BEFORE USING AT	TACHMENTS
David C. Simpso	าก	,	, Vice President Name		
Street Address			Street Address		·
74 Pequot Road			greer ziparesv		
City	State	Zip	City	State	Zip
Pawtucket	RI	02861	•		17
Secretary Name			Treasurer Name		ł
Nancy L. Simpso	on		David C. Simpso	on	
Street Address			* Street Address		
74 Pequot Road		.74 Pequot Road			
City	State	Zip	City	State	Zip
Pawtucket	RI	02861	Pawtucket	RI	02861
9. NAMES AND ADD	resses of the di	RECTORS ("X" BOX FO	PMUXCHMEND (FILLIN	SPACES BEFORE USING A	TTACHMENTS
Director Name			Director Name		
David C. Simpso	on		•		
Street Address			Street Address		
74 Pequot Road			•		
City	State	Zip	•City	State	Zip
Pawtucket	RI	02861	•		
Director Name		• • • • • • • • • • • • • • • • • • • •	Director Name		• • • • • • • • • • • • •
Nancy L. Simpso	n		•		
Street Address			Street Address		
74 Pequot Road		······			
City	State	Zip	·Ciry	State	Zip
Pawtucket	RI	02861			
10. SHARES AUTHOR	RIZED (CX BOX FO	RATTACHMENT)		XI BOX FOR ATTACHMENT	
AUTHORIZED SHARES Number of Shares	Ct rc :	Par Value	ISSUED SHARES	I ct. io i	10 11
inanistr of shores	Class/Series	rar value	Number of Shares	Class/Series	Par Value
1,000 COMM NO PA	AR VALUE		50	A common	no par value
			148	B common	no par value
*11695 DBC1/11/pc		ner the President, Vice	President, Secretary, Assi Under penalty of pe		nat I have examined les and statements,
rue Date (1	1 17 1/2	-	- VULL	/ Junger M.	4/18/05
X	IXX		Signature of Officer	Do	ite 7

David C. Simpson
Print or Type Name of Officer

Form 630 12/01

President

Title of Officer



Edward S. Inman, III, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: January 1-March 1 • Filing Fee: \$50.00 (FORM MUST BE TYPED IN BLACK) 1. Corporate ID No. 2. Name of Corporation SIMPSON'S PHARMACY, INC. 11695 3. Street Address Principal Business Office State ZIp 10 Newport Avenue Pawtucket RI 02861 4. Business Phone No. 5. State of Incorporation 6. SIC Code 401-722-7600 RHODE ISLAND 3277 7. Brief Description of the Character of Business Conducted in Rhode Island Pharmacy 8. NAMES AND ADDRESSES OF THE OFFICERS ("X" ROX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name David C. Simpson Street Address Street Address 74 Pequot Road City State 7.ip Pawtucket RI02861 Secretary Name Treusurer Name Nancy L. Simpson David C. Simpson Street Address Street Address 74 Pequot Road 74 Pequot Road State Zio State 7.10 Pawtucket RI 02861 Pawtucket RT 02861 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Director Name Director Name David C. Simpson Street Address Street Address 74 Pequot Road City State State ZIp Pawtucket RI 02861 Director Name Director Name Nancy L. Simpson Street Address Street Address 74 Pequot Road State 2.10 . City State Zip Pawtucket RI 02861 10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT) 11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES **ISSUED SHARES** Number of Shares Class/Series Par Value Number of Shares Closs/Series Par Value 1.000 COMM NO PAR VALUE 50 A Common No Par Value No Par Value 148 B Common

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



File Date:	1-24-02
Check No.:	7374
Ву:	2
FOR SECRETARY OF S	STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all matements contained herein are true and correct.

haid Ourses	N 1/7/02
Signature of Officer	hate

Print of Pype Name of Officer

18ES Title of Officer

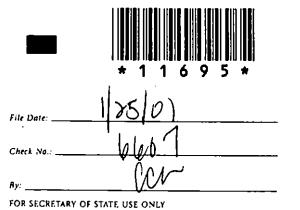
Corporations Division 100 North Main Street, Providence, RI 02903-1335

401-222-3040

PROFIT	CORPORATION	ANNUAL	REPORT	FOR	THE	YEAR	2001
iling Period	· Language I March 1	Elling Con. CCO					

Filing Period: January	I-March 1	• Filing Fec: \$50.00			INSTRUCTIO
(FORM MUST BE TYPED IN BLA	CK)				
1. Corporate ID No. 11695	2. Name of Corp SIMPSON	oration 'S PHARMACY, INC.			
3. Street Address Principal Business	Office		City	State	Zip
10 NEWPORT AVE	NUE	5. State of Incorporation	PAWTUCKET	RI	02861 6. <u>SIC Cod</u> e
401-722-7600 7. Brief Description of the Character	of Business Conduct	RHODE ISLAND ed in Rhode Island			3277
PHARMACY 8. NAMES AND ADDRESS President Name	SES OF THE O	FFICERS ("X" BOX FOR ATTACH	MENT) FILL IN SPACES BEI	FORE USING ATTA	ACHMENTS
DAVID C. SIMPS	ON		Street Address		
74 PEQUOT ROAD	Sidje	Zıp	City	State	Zip
PAWTUCKET Secretary Name	RI	02861	Treasurer Name		·
NANCY L. SIMPS	ON		DAVID C. SIMPS	ON	
74 PEQUOT ROAD	State	Zip	74 PEQUOT ROAD	State	Zip
PAWTUCKET 9. NAMES AND ADDRESS Director Name	RI SES OF THE D	02861 IRECTORS ("X" BOX FOR ATTAC	PAWTUCKET CHMENT) FILL IN SPACES B Director Name	RI EFORE USING AT	02861 TACHMENTS
DAVID C. SIMPS	ON		Street Address		
74 PEQUOT ROAD	State	Złp	· City	State	Zip
PAWTUCKET Director Name	RI	02861	Director Name		
NANCY L. SIMPS	ON		Street Address		
74 PEQUOT ROAD	State	Zip	Сну	State	Zíp
PAWTUCKET 10. SHARES AUTHORIZEI AUTHORIZZO SHARES	RI) (*x* box for a	02861 Ittachment)	11. SHARES ISSUED (*x*)	OX FOR ATTACHME	NT)
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200 A	COMMON	NO PAR VALUE	50	A COMMON	NO PAR VALUE
800 B	COMMON	NO PAR VALUE	148	R COMMON	NO DAD VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and configured herein are true and correct. Signature of Officer res Title of Officer



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: ;	January 1	l-March 1	•	Filing Fee: \$50.00	
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FORM MUST BE TYPED IN					
Corporate ID No. 11695	2_Numr of Compa SIMPSON	S PHARMACY, INC.			
3. Street Address Principal Bus	iness Office		City	State	Zip
10 NEWPORT Business Phane No	AVENUE	5. State of Incorporation RHODE ISLAND	PAWTUCKET	RI	02861 6. 3274
401-722-760 2. Brief Description of the Cha	0 racter of Business Conducted				3211
PHARMACY B. NAMES AND ADD resident Name	RESSES OF THE OF	FICERS ("X" BOX FOR ATTACE	(MENT) FILL IN SPACES Vice President Name	BEFORE USING ATTA	CHMENTS
DAVID C. SI	MPSON		Street Address		
74 PEQUOT R	OAD State	Zip	City	State	Zip
PAWTUCKET	RI	02861	Treasurer Name		
NANCY L. SI	MPSON		DAVID C. SIM	PSON	
74 PEQUOT R	OAD		74 PEQUOT RO	AD	
lity	State	Zip	City	State	Zip
PAWTUCKET NAMES AND ADD itector Name DAVID C. SI		02861 RECTORS (*X* BOX FOR ATTA	PAWTUCKET CHMENT) FILL IN SPACE Director Name	RI ES BEFORE USING ATT	ACHMENTS
treet Address			Street Address		
74 PEQUOT R	OAD State	Zip	City	Seve	7/-
PAWTUCKET Director Name	RI	02861	Gity Director Name	State	Zip
NANCY L. SI	MPSON		Street Address		
74 PEQUOT R	OAD				
ity	State	Zip	City	State	Zip
PAWTUCKET 0. SHARES AUTHOR UTHORIZED SHARES	RT IZED (*x* box for a)	02861 TACHMENT)	11. SHARES ISSUED (* ISSUED SHARIS	'X" BOX FOR ATTACHMEN	T)
umber of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
200	A COMMON	NO PAR VALUE	50	A COMMON	NO PAR VALUE
800	B COMMON	NO PAR VALUE	148	B COMMON	NO PAR VALUE
his report must be s	igned in ink by ei	ther the President, Vice F	President, Secretary. Assi	stant Secretary, Treas	surer. Receiver or Trust

istee



File Date:	1-10-00		
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# v:	AMF		

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and statement Sont Ined herein are true and correct.



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999 Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BL	4CK)				
1. Carporate ID N1695	² SIMPSON'S	PHARMACY, INC.			
3. Street Address Principal Busines:	o Office		Gity	State	Zip
10 NEWPORT AV 4. Business Phone No.	ENUE	^{5.} HHODE'ISL'AN	PAWTUCKET	RI	02861 6. sigga /7
(401) 722 - 7. 7. Brief Description of the Characte					:
PHARMACY 8. NAMES AND ADDRES President Name	SSES OF THE OFF	CERS ("X" BOX FOR ATTAC	HMENT) FILL IN SPACES B	EFORE USING ATTACI	HMENTS
DAVID C. SIMI Street Address	PSON		Street Address		
74 PEQUOT ROP			•	_	
City	State	2.ip	City	State	Zip
PAWTUCKET Secretary Name	RI	02861	Treasurer Name		
NANCY L. SIME	PSON		DAVID C. SIMPS	SON	· ·
74 PEQUOT ROA	T	• •	74 PEQUOT ROAL		
PAWTUCKET	State RI	` zip 02861	: city PAWTUCKET	State RI	† zip 02861
·			ACHMENT) C FILL IN SPACES Director Name		i
DAVID C. SIMI	PSON		: Street Address		· - · · · · - · · · -
74 PEQUOT ROA	AD State	Zip	City	State	+ _{Źip}
PAWTUCKET	. RI	02861	Director Name	*****	
NANCY L. SIMI	PSON		Street Address		
74 PEQUOT ROA					
City D & WITH CW FOR	State	^{Z(p} 02861	City	State	Zip
PAWTUCKET 10. SHARES AUTHORIZE AUTHORIZED SHARES	RI ED (*x* box for att	_	11. SHARES ISSUED (**)	* BOX FOR ATTACHMENT	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	I Par Value
200	A COMMON	NO PAR VALUE	50	A COMMON	NO PAR VALUE
800 1	COMMON	NO PAR VALUE	148	B COMMON	NO PAR VALUE
This report must be sign	ned in ink by citl	ner the President, Vice	President, Secretary, Assis	tant Secretary, Treasu	rer, Receiver or Truster
1881	R TEREL JIRIN SIJIN ISINI	EIR 1981			

	120 29,99
File Date:	121121
Check No.:	4830
By:	30. Or
	OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and nts/contained herein are true and correct Dile of Officer

James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR Filing Period: January 1-March 1 • Filing Fee: \$50.00

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TOKM 1	USI BE ITI'ED IN	HLACKI		

1.	Corporate	ID	No.	

2. Name of Corporation

11695

SIMPSON'S PHARMACY, INC.

3. Street Address Principal Business Office

City

State

Zio

10 NEWPORT AVENUE 4. Business Phone No.

5. State of Incorporation

RI

02861

6. SIC Code

(401) 722 - 7600

RHODE ISLAND

3277

7. Brief Description of the Character of Business Canducted in Rhode Island

PHARMACY

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name

Vice President Name

PAWTUCKET

DAVID C. SIMPSON Street Address

Street Address

74 PEQUOT ROAD

State

State

Zip

City

City

State

Zip

Zip

PAWTUCKET

02861

Treasurer Name

NANCY L. SIMPSON Street Address

Secretary Name

DAVID C. SIMPSON Street Address

74 PEQUOT ROAD

74 PEQUOT ROAD City

RI

PAWTUCKET

State

ŔΙ

02861

PAWTUCKET RI 02861 9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Oire tor Name

Director Name

DAVID C. SIMPSON Street Address

Street Address

PEQUOT ROAD

Zio

City

State

ZIp

PAWTUCKET Director Name

RI

02861

Director Name

NANCY L. SIMPSON

Street Address

Street Address

74 PEQUOT ROAD

City

State

Zip

City

State

Zip

PAWTUCKET

RI

02861

11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)

ISSUED SHARES

AUTHORIZZED SHARES Number of Shares

Class/Series

Par Value

Number of Shares

Class/Series

Par Value

200

A COMMON

10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)

NO PAR VALUE

50

A COMMON

NO PAR VALUE

NO PAR VALUE

148

B COMMON

800

B COMMON

NO PAR VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Title of Officer



James R. Langevin, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

2. Name of Corporation

•	•	_	•	
		6	u	٠,

SIMPSON'S PHARMACY, INC.

State

10 NEWPORT AVENUE 4. Business Phone No.

5. State of incorporation

RI

02861

(401) 722-7600

6. SIC Code

3. Street Address Principal Business Office

RHODE ISLAND

3277

7. Brief Description of the Character of Business Conducted in Rhode Island

PHARMACY

8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT)

President Name

Vice President Name

PAWTUCKET

DAVID C. SIMPSON Street Address

Street Address

74 PEQUOT ROAD

City

State

Zip

City

City

State

PAWTUCKET Secretary Name

Street Address

City

NANCY L. SIMPSON

RI02861

Treasurer Name

DAVID C. SIMPSON

Street Address

74 PEQUOT ROAD

State RI

02861

74 PEQUOT ROAD

State RI Zip 02861

9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT)

Director Name

Director Name

PAWTUCKET

DAVID C. SIMPSON Street Address

74 PEQUOT ROAD

Street Address

City

City

PAWTUCKET

State

PAWTUCKET Director Name

RI

State

02861

Director Name

NANCY L. SIMPSON

Street Address

Street Address

74 PEQUOT ROAD

City

State

City

State

Zip

PAWTUCKET

RI

02861

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT) AUTHORIZED SHARES Number of Shares

Class/Series

Par Value

ISSUED SHARES Number of Shores

Class/Series

Par Value

200

A COMMON

NO PAR VALUE

50

A COMMON

PAR VALUE

800

B COMMON

NO PAR VALUE

148

B COMMON

NO PAR VALUE

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FOR SECRETARY OF STATE USE ONL

Under penalty of perjury, I declare and affirm that I have examined this pepult, including any accompanying schedules and statements, and that all matements contained herein are true and correct.

DAVID C. SIMPSON Print or Type Name of Officer

PRESIDENT

Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations James R. Langevin, Secretary of State

Corporations Division 100 North Main Street

Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1

Filing Fee: \$50.00

CORPORATE IO NO	2. NAME OF CORPORA		RINT IN BLACK INK.		
11695	!	PSON'S PHARMACY, I	NC		
ŚTRĘĘ T ADDRESS PANCIPAL BUS		a son s FRARRACI, I	an -	STATE	ZP C006
O Newport	Avenue		Pawtucket	RI	02861
O Newport		5. STATE OF INCORPORATION			6 Sic 000E
722 - 7600		RHODE IS	LAND		3277
	CTER OF BUSHIESS CONDUCTED IN R	CHODE ISLAND			
Pharmacy			n and the second se		
SIDENT NAZE		NAMES AND ADDRI	ESSES OF THE () Typoc president name =	FFICERS	
avid C. Si	mpson				
4 Pequot R	oad		STREET ADDRESS		
· · · · · · · · ·	SIATE	ZIP COO€	άN	STATE	ZIP COOE
awtucket	RI	02861	TREASURER NAME		
Nancy L. Si	mpson		David C. Sin	npson	
RET ADDRESS			STREET ADDRESS		
74 Pequot R	Oad Isine	<u>72</u> ₽ C000€	74 Pequot Ro	STATE	ZP CODE
awtucket	RI	02861	Pawtucket	RI	02861
RECTOR HAVE	 9	NAMES AND ADDR	ESSES OF THE D	IRECTORS	
David C. Si	mpson				
RETADDRESS 74 Pequot R	oad		STREET ADORESS		
Υ	STATE	ZP 000E	an	STATE	ZIP COOE
Pawtucket	RI	02861		<u>_</u>	
	mpson		DIRECTOR NAME		
Vancy L. Si			STREET ADORESS		· · · · · · · · · · · · · · · · · · ·
74 Pequot R	oad STATE	j ZIP COO€	ari	STATE	; 27° COOLE
Pawtucket	RI	02861	1		
	10.	SHARES AUTHORI	ZED AND ISSUE	0	
MUMBER OF SHARES	AUTHORIZED SHARI CLASS / SERIES	ES PAR VALUE	HUMBER OF SHARES	ISSUED SHARES OLASS/SERIES	PARVALUE
200					
200	A Common	No Par Value	50	A Common	No Par Valu
800	B Common	No Par Value	148	B Common	No Par Valu
					1
		This report must be SIGN esident, Secretary, Assist	NED IN INK by either	the	

File Date: $\mathcal{H}\mathcal{M} = \mathcal{H}$

Check No:

By:

2495 (V)

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

President

Tale of Officer

David C. Simpson

Print or Type Name of Officer

_TEB 3 1896

State of Rhode Island and Providence Plantations

Office of the Secretary of State
100 North Main Street
Providence, Rhode Island 02902-1335
401-277-3040

ANNUAL REPORT

Please Type of Print File Annually - Jan. 1 - March 1

Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Jame of Corporation: Justiness entity organized under the laws of the State of: Justiness entity organized under the laws of the State of: Justiness and telephone number of principal office of principal office of business entity in land (Provide street address - Not P O. Box): O Newport Avenue awtucket, RI 02861	NAMES O	[] Professional S	check one): poration (See RIGL Chapter 7-1-1) pervice Corporation (See RIGL Chapte the character of business conducted in F	·
or foreign entity, address and telephone number of principal office of hone: () ddress and telephone of the principal office of business entity in land (Provide street address - Not P O. Box): 0 Newport Avenue awtucket, RI 02861	NAMES O	Business Entity is (c [X] Business Corp [] Professional S Brief statement of th Pharmacy F THE OFFICERS ADDRESS	check one): Doration (See RIGL Chapter 7-1-1) Diervice Corporation (See RIGL Chapte the character of business conducted in F	
or foreign entity, address and telephone number of principal office of hone: () ddress and telephone of the principal office of business entity in land (Provide street address - Not P O. Box): 0 Newport Avenue awtucket, RI 02861	NAMES O	[X] Business Corp [] Professional S Brief statement of th Pharmacy F THE OFFICERS ADDRESS	poration (See RIGL Chapter 7-1-1) Service Corporation (See RIGL Chapte the character of business conducted in F	•
ddress and telephone of the principal office of business entity in land (Provide street address - Not P O. Box): 0 Newport Avenue awtucket, RI 02861	NAMES O	Brief statement of the Pharmacy F THE OFFICERS ADDRESS	Service Corporation (See RIGL Chapte to character of business conducted in F	•
ddress and telephone of the principal office of business entity in land (Provide street address - Not P O. Box): 0 Newport Avenue awtucket, RI 02861	NAMES O	Brief statement of th Pharmacy F THE OFFICERS ADDRESS	ARE:	•
ddress and telephone of the principal office of business entity in land (Provide street address - Not P O. Box): 0 Newport Avenue awtucket, RI 02861	NAMES O	Pharmacy F THE OFFICERS ADDRESS	ARE:	Rhode Island
ddress and telephone of the principal office of business entity in land (Provide street address - Not P O. Box): 0 Newport Avenue awtucket, RI 02861	NAMES O	F THE OFFICERS		
land (Provide street address - Not P O. Box): 0 Newport Avenue awtucket, RI 02861	NAMES O	ADDRESS		
0 Newport Avenue awtucket, RI 02861	street 74 Pe	ADDRESS		
awtucket, RI 02861	street 74 Pe	ADDRESS		
	street 74 Pe	ADDRESS		
none. (401) 722-7600	street 74 Pe	ADDRESS		
	street 74 Pe	ADDRESS		
THE ?	street 74 Pe	ADDRESS		
ESIDENT		equat Road	the state of the s	ZIP CODE
avid C. Simpson		Equol Noau	Pawtucket, RI	02861
CE PRESIDENT		ADDRESS	CHYSTATE	ZIP CODE
URETARY	STREET	ADDRESS	CHY/STATE	
ancy L. Simpson		equot Road	Pawtucket, RI	ZIP CODE
EASURFR		ADDRESS	CITY/STATE	02861
avid C. Simpson		equot Road	Pawtucket, RI	ZIP CODE 02861
THE N		THE DIRECTORS	ARF:	02001
ME		ADDRESS	CITY/STATE	ZIP CODE
avid C. Simpson	74 Pe	equot Road	Pawtucket, RI	02861
ME	STREET	ADDRESS	СПУ/STATE	ZIP CODE
ancy L. Simpson	74 Pe	equot Road	Pawtucket, RI	02861
ME -	STREET /	ADDRESS	CHY/STATE	ZIP CODE
UMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHAR	RES ISSUED AND OUTSTANDING	(Rider may be attached)
inber of Shares Class / Series		Number of Shares	Class / Series	
A Common, No Par Value		50	A Common No Des Veli	ue al
800 B Common, No Par Value		148	B Common, No Par Valu	10 13 1 2 10 C
			- common, no rai van	J 6 1993
				FFB? 1995
				1 7 7 1 1 L
		1///		- FC - 179
January 6 19 95	В	skin 10	mhan	S. M.
		David C. Simpso	n	
		PRINT OR TYPE NAME OF O	OFFICER SIGNING	
n 31 - 1795		TITLE OF OFFICER SIGNING		
DESIGNATED DEGI	STEDEN			<u> </u>
DESIGNATED REGISTANCE If the registered office and/or registered agent ind	OIERED A	TOUR SERV	TCE OF PROCESS:	

Filing Fee \$50.00 Payable to: Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations Office of The Secretary of State

File Annually LLC, Sept. 1 Nov. 1 CORP, Jan. 1 - March 1

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

Corporate ID	Annual Report for the year1994
Name of Business Entity:	SIMPSON'S PHARMACY, INC.
Business entity organized under the laws of the State of R.T Federal Taxpayer Identification Number. For foreign entity, address and telephone number of principal office.	Business Entity is (check one): [*] Business Corporation (See RIGL Chapter 7-1.1) [-] Professional Service Corporation (See RIGL Chapter 7-5.1) [-] Limited Liability Company (See RIGL 7-16) Name, title and mailing address of contact person to whom communications may be directed: [-] PRYLD S. SIMPSON PRES.
Phone. () Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)	PANTUCKET, R.I. 02861-4497 Brief statement of the character of business conducted in Rhode Island
SIMPSON'S PHARMACY, INC. 10 NEWFORT AVE PAWTUCKEY, RI 4884-4487 Phone (401) 722-7600	Date of Qualification to do business in Rhode Island (if foreign entity)
THE NAMES OF	THE OFFICERS ARE:
DAVID C. SIMPSON 1 HISTORIAN ON THE STREET 1 H	ADDRESS CONSTATE ZH CODE PEQUOT RD TAWTUCKET RT. 02861 ADDRESS CONSTATE ZH CODE
NANCY L. SIMPSON 74 CLUSTOPIANON RECORDS OF PSICRETARY CHECKER 1	PEQUAT RD., PAWTHCKET, RI, 02861
DAVID C. SIMPSON 74	PEQUOT RD., PAWTHCKET, R.T. 02861 PEQUOT RD., PAWTHCKET, R.T. 02861 THE DIRECTORS ARE:
Davis a sugar of	PEQUOT RD. PAWTUCKET, RT. 02861 ADDRESS CONSTAN. PEQUOT RD. PAWTUCKET, RT. 02861 ADDRESS CONSTAN. ADDRESS CONSTAN.
NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 200 800	NUMBER 50 2.66
CLASS A COMMON B COMMON SERIES PAR VALUE OR WITHOUT PAR NO PAR VALUE NO PAR VALUE	CLASS A COMMON B. COMMON SERIES PAR VALUE OR WITHOUT BAN MO PAR VALUE NO PAR YALUE
PEB. 7 1994 Date FEB. 1 1 1994 A A LIA D 2	DAVID C SIMPSON RESIDENT
DESIGNATED REGISTERED OR RESI	DENT AGENT FOR SERVICE OF PROCESS: registered or resident agent. Form 9 or Form LLC 3 must be filed.

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID	11695	Annual Report	for the year 1993
FIRST: The na	me of the corporation is		·
••••••	Simpson'	s Pharmacy, Inc.	
SECOND: It is	incorporated under the laws of	Rhode Island	
THIRD: Charae	cter of business, briefly stated, is.		
FOURTH: If for			
Fifth: Busines			
SIXTH: Names	and addresses of its directors and		(Attach rider if necessary) uding number, street, zip code)
Ethel M. Si	npson Director	264 Park View	Drive, Pawtucket, RI
David C. Sin	npson Director	74 Pequot Roa	d, Pawtucket, RI
	Director		
David C. Sir	npson President	74 Pequot Road	d, Pawtucket, RI
Ethel M. Sir	npson Vice Preside	ent 264 Park View I	Drive, Pawtucket, RI
	ger Secretary		rive, Olympia, WA 98506
David C. Sin	pson Treasurer	74 Pequot Road	i, Pawtucket, RI
SEVENTH: Num	ber of Shares authorized:		Par Value
No. of Shares	Class	Scries	or statement that shares are without par value
200 800	A Common B Common	() oer	No Par Value No Par Value
EiGHTH: Numbe	er of Shares issued:	<u> </u>	Par Value
No. of Shares	Class	Series	or statement that Or statement that par without par value
50 200	A Common B Common	Rec'd & Filed F	No Par Value No Par Value
Dated Februa		Simpson's Pharma Name of Corporation August March	icy, Inc.
		ile Ties	
Form 31 1/85			

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

orporate ID	11695	Annual Report for the year	. 1992
First: The nai	me of the corporation is		
	Simpson	's Pharmacy, Inc.	•••••
Second: It is i	ncorporated under the laws of	Rhode Island	
THIRD: Charac	eter of business, briefly stated, is.		
·····	Pharmacy		
FOURTH: If for	eign corporation, address of its p	orincipal office	
Fifth: Business	s address in Rhode Island		
		vidence, Rhode Island	
SIXTH: Names a	and addresses of its directors and	1 officers: Address (including number, st	(Attach rider if necess
Ethel M. Si	mpson Director	264 Park View Drive,	Pawtucket, RI
David C. Si	mpson Director	74 Pequot Road, Pawt	
	Director		
David C. Si	mpson President	74 Pequot Road, Pawt	ucket, RI
Ethel M. Si			
Winifred Ja		904 East Bay Drive, O	
David C. Si	-	74 Pequot Road, Pawt	
SEVENTH: Num	ber of Shares authorized:	Rec'd & Filed right 2 o 1997	Par Value or statement that
No. of Shares	Class	Series 2 8633A	shares are without par value
200 800	A Common B Common		No Par Value No Par Value
Еіднтн: Numbe	er of Shares issued:		Par Value or statement that
No. of Shares	Class	Series	shares are without par value
50 200	A Common B Common		No Par Value No Par Value
ted Janua		Simpson's Pharmacy, Inc	· .
		Name of Corporation)	<i>→</i>
	В	y faud Junpon (Thes

To be filed annually between January 1st and March 1st

State of Phode Island and Frovidence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

Corporate ID.	11695	PROVIDENCE, R	Annual Report for the y	1991
• ING1,		Simpson'	s Pharmacy, Inc.	
SECOND:	It is incorporate	d under the laws of	Rhode Island	
THIRD:	Character of busing	ness, briefly stated, is		
••••••••••••••••••	Pha	armacy		•••••
FOURTH:	If foreign corpor	ration, address of its pri	incipal office	······································
F1FTH: E	Business address in	Rhode Island		
4	0 Westminste	er Street, Provi	idence, Rhode Island	
Sixth: N	Names and address	ses of its directors and o	Officers: Address (including numbe	(Attach rider if necess
Ethel	M. Simpson	Director	264 Park View Drive	
David	C. Simpson	Director	74 Pequot Road, Par	*****************************
*******************	*************************	Director		
David (C. Simpson	President	74 Pequot Road, Par	wtucket, RI
Ethel 1	4. Simpson	Vice Presiden	264 Park View Drive	, Pawtucket, RI
Winifr	ed Jamer	Secretary	904 East Bay Drive,	
	C. Simpson	Treasurer	74 Pequot Road, Pav	vtucket, RI
SEVENTH:	Number of Shar	es authorized:		Par Value or statement that
No. of Shares		Class	Series	shares are without par value
200 800		A Common B Common	PAID	No Par Value No Par Value
Еіднтн:	Number of Shares	s issued:	SEC'Y OF STATE	Par Value or statement that
No. of Shares		Class	Series Series	shares are without par value
50 200		A Common B Common		No Par Value No Par Value
ted. J	anuary 21,	19 91	Simpson's Pharmacy, I	
	***************************************		me of Corporation)	•••••••••••••••••••••••••••••••••••••••
		By	/ Llightfimpfin	
(Repo	rt must be signed by a	an officer) Titl	les (the	

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RHODE ISLAND 02903

		Annual Report for the year	
FIRST: The name of	of the corporation is		••••••
•	Simpson	s Pharmacy, Inc.	*****
SECOND: It is income	porated under the laws of	Rhode Island	***************************************
······	rnarmacy		
FOURTH: If foreign		ncipal office	
Fifth: Business add			
40 Westm	inster Street, Provi	idence, Rhode Island	***************************************
SIXTH: Names and a	addresses of its directors and o	Man.	Attach rider if necessa
Name	Office	Address (including number, street	zip code)
Ethel M. Simp	Director	264 Park View Drive,	Pawtucket, I
David C. Simp	son Director	74 Pequot Road, Pawt	ucket, RI
	Director		
David C. Simps	on President	74 Pequot Road, Pawt	ucket. RI
Ethel M. Simps	on Vice President	264 Park View Drive,	
Winifred Jager	Secretary	103 Shannon Drive, Sp	
David C. Simps			
SEVENTH: Number o		74 Pequot Road, Pawt	
No. of Shares	Class		Par Value r statement that ares are without
200	A Common		par value
800	B Common		No Par Value No Par Value
EIGHTH: Number of S	Shares issued:	٠, ٠,٠,٠	Par Value
No. of Shares	Class		statement that tres are without par value
50 200	A Common B Common		No Par Value
ed February	10, 19 90	Simpson's Pharmacy Inc	o Par Value
	(Nam	e of Corporation)	***************************************
	By	yau mpga	*************************

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

Corporate ID	11695	Annual Report for the	e year 1989
	Simpson	n's Pharmacy, Inc.	
		f Rhode Island	
		is	
	eign corporation, address of it	s principal office	
40 West	minster Street, Pro	vidence, Rhode Island	
	and addresses of its directors a	and officers:	(Attach rider if necessary)
Ethel M. Sim	pson Director	264 Park View Dri	ye. Pawtucket. Ri
David C. Sim	oson Director	74 Pequot Road.	
	Director		
David C. Simp	oson President		
Ethel M. Simp	oson Vice Presi	ident 264 Park View Driv	Ve. Pawtucket DI
Winifred Jage	Secretary	103 Shannon Drive	
David C. Simp			
SEVENTH: Numb	er of Shares authorized:		
No. of Shares	Class	Series	Par Value or statement that shares are without par value
200 800	A Common B Common	PAID	No Par Value
Eіднтн: Numbei	of Shares issued:	JAN 20 1309	No Par Value
No of Shares	Class	SEC'Y OF STATE	or statement that shares are without
50	A Common	venos	par value
200	B Common		No Par Value No Par Value
Dated January	19 .89	Simpson's PharmacyI	nc.
		By Clint Jompsix	······
(Report must be	e signed by an officer)	Title Ten	

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE. RHODE ISLAND 02903

Corporate ID116	595	Annual Report for	the year 1988
FIRST: The name	of the corporation is		
	Simpson's		
	orporated under the laws of		
	r of business, briefly stated, is		
	Pharmacy		
FOURTH: If foreign	gn corporation, address of its pri	incipal office	•••••••••••••••••••••••••••••••••••••••
	ddress in Rhode Island		
	nster Street, Provid		
	d addresses of its directors and	officers:	(Attach rider if necessary) number, street, zip code)
Ethel M. Simps	on Director	264 Park View D	rive, Pawtucket, RI
David C. Simps	onDirector	74 Pequot Road	, Pawtucket, RI
	Director		
David C. Simpa	onPresident	74 Pequot Road	Pawtucket, RI
Ethel M. Simps	onVice Presiden	it 264 Park View Di	rive, Pawtucket, RI
Winifred Jager	Secretary	103 Shannon Driv	ve, Spartenberg, S.C
David C. Simps	onTreasurer	74 Pequot Road,	Pawtucket, RI
SEVENTH: Numbe	r of Shares authorized:		Par Value
No. of Shares	Class	Series	or statement that shares are without par value
200 800	A Common B Common		No Par Value No Par Value
EIGHTH: Number	of Shares issued:		Par Value
No. of Shares	MAR 1.	ට 198a Senes	or statement that shares are without pur value
50 200	A Common B Common	87AB	No Par Value No Par Value
Dated February		Simpeon's Pharmacy	, Inc.
	Bv	V: 1/2:	n
(Report must be	signed by an officer) Tit		
Form 31 1/85	J = -; -:: J.Moor, 110	/	•••••••

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

Corporate ID	11695	Annual Report for the	year 1987
FIRST: The	name of the corporation is	······································	
	Simpson's P	harmacy, Inc.	
	is incorporated under the laws of		
	racter of business, briefly stated, is.		
	Pharmacy		
FOURTH: If	foreign corporation, address of its p	principal office	
	ness address in Rhode Island		
	Westminster Street, Pro		
Sixth: Name	es and addresses of its directors and		(Attach rider if necessary)
Ethel M. Sim	pson Director	264 Park View Drive	, Pawtucket, RI
David C. Sim	pson Director	74 Pequot Road, Paw	
	Director	•	
David C. Sim	oson President	74 Pequot Road, Paw	
Ethel M. Sim	oson Vice Preside		
	Secretary	103 Shannon Dr., Spa	
David C. Simp	oson Treasurer	74 Pequot Road, Paw	
Seventh: Nu	imber of Shares authorized:		Par Value
No. of Shares 200 800	Class A Common B Common	series PAID MAR 9 1987	or statement that shares are without par value No Par Value No Par V
Eighth: Nun	aber of Shares issued:	SECT OF STATE	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
50 200	A Common B Common		No Par Value No Par Value
	В	- , ,	Inc.
(Report mi	ist be signed by an officer) T	itle President	*******

State of Rhode Island and Providence Plantations CORPORATIONS DIVISION 270 WESTMINSTER MALL PROVIDENCE. RHODE ISLAND 02903

Corporate ID	45	Annual Report for	the year 1986
FIRST: The name	of the corporation is	······	
SECOND: It is inco	rporated under the laws of		
THIRD: Character	of business, briefly stated, is		
FOURTH: If foreign	corporation, address of its prin	ncipal office	
FIFTH: Business ad	dress in Rhode Island		
40 Westmi	nster Street, Provid	lence. Rhode Island	i
	addresses of its directors and o	fficers:	(Attach rider if necessary
Ethel M. Simpso	n Director		rive, Pawt., RI
David C. Simpso	n Director		, Pawt,, RI
······	Director		
David C. Simpso	n President		Pawt, RI
Ethel M. Simpso	n Vice President	264 Park View Dr	ive, Pawt., RI
Winifred Jager	Secretary		Spartenberg, S.C.
David C. Simpso	n Treasurer	74 Pequot Road,	
SEVENTH: Number No. of Shares 200	of Shares authorized:	Series	Par Value or statement that shares are without par value
800	A Common B Common		No Par Value No Par Value
No. of Shares	f Shares issued:	Series	Par Value or statement that shares are without par value
50 200	A Common: B Common:		No Par Value No Par Value
	See page 1771 (Name	Simpson's Pharmacy	, Inc.
MAR 21		Caux Cymp	111
(Report must be si	gned by an officer)	e President	

To be filed annually between January 1st and March 1st

State of Chode Island and Providence Plantations Office of the secretary of state

ID: 11	495	Annual Pana	A fam. 43	
First: The	name of the corpo	oration is	t for the year 1985	
Heregoestoracco and the control of t	Simpson's F	harmacy, Inc.		
SECOND: It	is incorporated u	nder the laws of	Rhode Island	
THIRD: Chai	racter of business.	briefly stated in		
Charles of the Control of the Contro	Pharma	cy	the same of the sa	
Fourth: If	foreign corporati	on, address of its pri	ncipal office	
FiFTH: Busin	ness address in R	hode Island	**************************************	
40 Westm	inster Street.	Providence Ph-	de Island	
SIXTH: Name	s and addresses	of its directors and c	de Island	
(Add	resses must include s	street and number, if any)	ificers:	
Name	Office		_	
Ethel M. Simpson	n Direct	tor 264 Park	Address View Drive, Pawt., RI	
David C. Simpson	1 Direct			
		A.	Road, Pawt., RI	
David C. Simpsor	1 Presid	*	n	
Ethel M. Simpson	Vice D	mail (26) Dans t	Road, Pawt., RI	
Winifred Jager	Committee F	resident zot fark v	1ew Drive, Pawt., RI	
David C. Simpson	. m	••	n Drive, Spartenberg, S.	c.
=	recues, attach rider)		Road, Pawt., RI	
SEVENTH: Num	iber of Shares at	uthorized:	ъ	
No. of Shares 200	Class	Series	Par Value or statement that shares are without	
800	A Common B Common		No Par Value	
			No Par Value	
Eighth: Number	om of Cl.			
No. of Shares		ed:	Par Value or statement that	
50	Class	Serles	shares are without par value	
200	A Common B Common		No Par Value	
	2 COMMON		No Par Value	
Dated: January	29, 19 85	Simpsonte	Pharmacy, Inc.	
	40	(Name of Corpora	lipn) .	
	XX	By Vaul	mpm	
BRCS STOP MA	R 1985	Title Presi	dent	
		(Report must be	signed by an officer)	
				

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

		Annual Report for the year	1984
FIRST: The na	ame of the corporation	on is	
***************************************	Simpson's Phar	macy, Inc.	***************************************
SECOND: It is	incorporated under	the laws of Rhode Is	land
	Pharman	fly stated, is	
For 14 4	тиагшасу		
		address of its principal office	
		Island (blank reports will b	
address)40 Westmin	ster Street, Pro	ovidence. Rhode Island	e maned w uns
Sixth: Names	and addresses of its	s directors and officers:	***************************************
	resses must include street		
Name	Office		
Ethel M. Simpson		Address	5
David C. Simpson	D	264 Park View Driv	
		74 Pequot Road, F	awt., RI
David C Simpon			
David C. Simpson			awt., RI
Etnel M. Simpson	Vice Presid	lent 264 Park View Driv	e, Pawt, RI
"Inlined Jager	Secretary	47 Kirk Drive, Pa	
David C. Simpson (If additional space is need	Treasurar	74 Pequot Road, Pa	awt., RI
SEVENTH: Num	ber of Shares author	rized:	Par Value
No. of Shares	Clasa	or	statement that res are without
200	A Common		Par Value
800	B Common		Par Value
Elevinia N	• •		
	er of Shares issued:	or s	Par Value tatement that
No. of Shares 50	Class	Series shar	es are without par value
200	A Common B Common		Par Value
		Vi .	Par Value
Dated: Februar	у <u>1</u> 4, 1984	Simpson's Pharmac	v Inc
		(Xisme of Corporation)	J.,
1 220x	1	By & Caul Compon	
APR 10 1984	v/ 2	Title o President	
Wr.,	/	(Report must be signed by	en officer)
		•	

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for Information. 277-3040

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations Office of the secretary of state

Etman m		Annual Report for the	year 1983
FIRST: The name of	of the corporation	1 is	
***************************************	Simpson's	Pharmacy, Inc.	
SECOND: It is incor	porated under th	e laws of Rhod	e Island
THIRD: Character of	of business, briefly	y stated, is	***************************************
	corporation, add	dress of its principal of	fice
address) 40 Westminste	dress in Rhode ler Street, Pro	Island (blank reports w	vill be mailed to this
The difference of the control of the	addresses of its must include street as	directors and officers:	
Name		no number, ir any)	
Ethel M. Simpson	Office		dress
			rive, Pawt., RI
David C. Simpson		74 Pequot Road	, Pawt., RI
David C. Simpson			
David C. Simpson	President	74 Pequot Road	, Pawt., RI
Ethel M. Simpson	Vice Preside	ent 264 Park View D	rive, Pawt., RI
Winifred Jager	Secretary	47 Kirk Drive,	Pawt., RI
David C. Simpson (If additional space is needed, a	Treasurer	74 Pequot Road	
SEVENTH: Number o	f Shares authoris	zed:	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
200	A Common		No Par Value
800	B Common	MAR 10 1983	No Par Value
Eighth: Number of	Shares issued:	,	Par Value
No. of Shares	Class	Series	or statement that shares are without par value
50	A Common	3	No Par Value
200	B Common	, ,	No Par Value
Dated: January 3	19 83 B	Simpson's Pharman (Name of Corporation) y Let Muniperal itle President (Report must be signed	acy, Inc.

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information, 277-3040

To be filed annually between January 1st and March 1st

State of Thode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

		Annual Report fo	or the year 1982
FIRST:	The name of the corpora	tion is	
***************************************	Simpson's Phar	macy, Inc.	
SECOND:	It is incorporated unde	er the laws of R	hode Island
THIRD:	Character of business, br	iefly stated is	
***************************************	Pharmacy		•
Fourth:	If foreign corporation,	address of its princ	ipal office
address) 40we	Business address in Rhoo	le Island (blank repo Providence, Rhode	orts will be mailed to this
ſ	(Addresses must include stre	et and number if and	cers:
Na _r		ot and humber, it any)	•
Ethel M. Si	mpson Director	26h B	Address
David C. Si	mpson Director		ew Drive, Pawt., R.I
	Director	/4 Pequot	Road, Pawt., RI
	npson President		0
Ethel M. Sir	President	74 Pequot F	Road, Pawt., RI
Winifred Jac	Vice Pres		ew Drive, Pawt., RI
David C Str	ger Secretary		ve, Pawt., RI
(If additional space is	pson Treasurer	74 Pequot R	load, Pawt., RI
	Number of Shares author	Orizad ·	_
No. of Shares	Class	Stries	Par Value or stotement that shares are without
200	A Co	atries	par value
800	A Common	46 N.D. 1 P.	No Par Value
	B Common	16	1982 No Par Value
	umber of Shares issued	1: 7 /*	Par Value or statement that
No. of Shares	Class	Series	shares are without par value
50	A Common	3	No Par Value
200	B Common	6	No Par Value
Dated: F	ebruary 5, 1982	Simpson's Pha	
	•	- (Name of Corporation)	<i>l</i> :
		By Blend	sichs cu_
		Title Presi	
		• • • • • • • • • • • • • • • • • • •	signed by an officer)

If the corporation has changed its registered of the corporation of the registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

6

To be filed annually between January 1st and March 1st

State of Ahode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

	OF		
	Simpson's Phar	macy, Inc.	
amended, the undersigne	ovisions of Section 7. ed corporation hereby f the corporation is	1.1-118 of the submits the f	General Laws, 1956, as ollowing annual report:
SECOND: It is inco			hode Island
	s of its registered office	e in Rhode Island	d is
and the name of its registe	ered agent in Rhode Is		
*** ***********************************			
country under the laws of	which it is incorporated	is	cipal office in the state or
	eter of the business in	which it is ac	tually engaged in Rhode
	and respective address		
Ethel M. Simpson	Office Director	264 Park Vis	Address swDr.ive,Pawtucket,RI
David C. Simpson			Road, Pawtucket, RI
			ACCES OF THE CONTROL
David C. Simpson			load, Pawtucket, RI
Ethel M. Simpson			
Winifred Jager			ve. Pawtucket, RI
David C. Simpson			load, Pawtucket, RI
SEVENTH: The aggre by classes, par value of sha	egate number of shares	which it has au	thority to issue, itemized
Number of Shares	Class	Series	Shares are without Par Value
200	A Common		NA Par Value
800	B Common		MAR 24 198

Farm 31 8-79

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
50	A Common		No Par Value
200	B (Common		No Par Value

Dated January 6, 1981 Simpson's Pharmacy, Inc.

By Sun June OF CORPORATION

Ita_President

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

************************	Simpson's Pharmacy	, Inc.	
amended, the undersign	orovisions of Section 7.1 ned corporation hereby of the corporation is Simpson's Pharmacy	submits the foll	owing annual report:
SECOND: It is inc	corporated under the la		
THIRD: The addre	ess of its registered office	in Rhode Island is	
and the name of its regis	stered agent in Rhode Isl	land at such addre	
FOURTH: If a for country under the laws o	reign corporation, the ad f which it is incorporated	l is	
FIFTH: The char: Island, briefly stated, is	acter of the business in	which it is actua	
	Pharmacy		
SIXTH: The name	s and respective address	es of its directors	and officers are:
Ethel M. Simpson	Director	264 Park View	Drive, Pawtucket, RI
David C. Simpson			, Pawtucket, RI
***************************************	Director		
H-7771 141 141-1411-1411-1411-141-141-141-141	Director		5-v
· · · · · · · · · · · · · · · · · · ·	Director		

David C. Simpson	President		, Pawtucket, RI
	Vice President		Drive, Pawtucket, RI
Winifred Jager	Secretary		Pawtucket, RI
David C. Simpson			, Pawtucket, RI
SEVENTH: The agg by classes, par value of sl	regate number of shares nares, shares without par	which it has authovalue,andseries,ii	ority to issue, itemized fany, within a class, is:
Number of Shares	Class	<u>Series</u>	Par Value per Share or Statement that Shares are without Par Value
200	A Common		No Par Value
800	B Common		
000	D COMENON		No Par Value :

APR 25 1981

Form 31 8-7

Number of Shares	Class	Series	or Statement that Shares are without Par Value
50	A Common		No Par Value
200	B Common		No Par Value

Dated J	nuary 16	, 1980
---------	----------	--------

Simpson's Pharmacy, Inc.
NAME OF CORPORATION

By Caid C. Jungson

Its_President

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

	OF	•	
************************	Simpson's Ph	armacy, Inc.	
Pursuant to the pamended, the undersign FIRST: The name	provisions of Section ned corporation hereby e of the corporation is	7.1.1-118 of the y submits the following	. General Laws, 1956, as
			Rhode Island
THIRD: The addr	ress of its registered off et, Providence, Rhod stered agent in Rhode l	fice in Rhode Isla e_Island Island at such ad	nd is
country under the laws	reign corporation, the of which it is incorpora	address of its pri	ncipal office in the state or
Island, briefly stated, i	S Pharmacy		ctually engaged in Rhode
	and respective address		
Ethel M. Simpson		264 Park View	J Drive, Pawtucket, RI
David C. Simpson	Director		ad, Pawtucket, RI
	Director),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•
David C. Simpson			ad, Pawtucket, RI
			Drive, Pawtucket, RI
Winifred Jager			Pawtucket, RI
David C. Simpson	Treasurer		id, Pawtucket, RI
SEVENTH: The ag by classes, par value of sl	ggregate number of sha hares, shares without p	ares which it has a ar value, and seri	authority to issue, itemized es, if any, within a class, is:
Number of Shares	Class	3 Series Vo	Par Value per Share or Statement that Shares are without Par Value
200	A Common	79	No. Bon No.

800 8 Common No Par Value

Number of Shares	Class Series		or Statement that Shares are without Par Value	
50	A Common		No Par Value	
200	8 Common		No Par Value	

Dated January 24 , 1979 Simpson's Pharmacy, Inc.

FORM 21 12M 1-73

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

	`	<i>)</i>	
	Simpson's Pharm	macy, Inc.	
Pursuant to the amended, the undersign	provisions of Sectio ned corporation herel	n 7-1.1-118 of the (Jeneral Laws 1956 as
FIRST: The nam	e of the corporation i	is	
	Simpson's Pharm	nacy, Inc.	
SECOND: It is in			[sland
THIRD: The add	ress of its registered of treet, Providence	office in Rhode Island ce, Rhode Island	is
and the name of its regi		e Island at such addre	s9 is
FOURTH: If a fo	of which it is incorpo	e address of its princi orated is	pal office in the state or
Island, briefly stated, is	racter of the busines	ss in which it is actu	ally engaged in Rhode
SIXTH: The name	es and respective add	resses of its directors a	and officers are:
Ethel M. Simpson	Director		Drive, Pawt, R.I.
David C. Simpson	Director		; Pawtucket, R.I.
			······································
		The state of the s	
***************************************		***************************************	
David C. Simpson	Dracidant	74 Permot Rd	; Pawtucket, R.I.
Ethel M. Simpson	Vice Preside	264 Park View	Drive, Pawt., R.I.
Winifred Jager	Complement	47 Kirk Driv	e, Pawtucket, R.I.
David C. Simpson	Traccura		
			; Pawtucket, R.I.
SEVENTH: The ag by classes, par value of sl	gregate number of sh hares, shares without	iares which it has auth par value, and series, i	nority to issue, itemized if any, within a class, is:
Number of Shares	Class	3 Seri€	Par Value per Share or Statement that Shares are without Par Value
200	A Common	78	No Par Value
800	В Соттол	6]]3A14	No Par Value APR 20 1978
		• •	H. H.

Number of Shares	Class	Scries	Par Value per Share or Statement that Shares are without Par Value
50 -	A Common		No Par Value
200 ·	B Common		No Par Value

Dated January 13 , 1978

Simpson's Pharmacy, Inc.
(NAME OF CORPORATION)

By / Vaid Simpson

14President



To be filed annually between January 1st and March 1st

State of Alpde Island and Providence Plantations Office of the secretary of state

ANNUAL REPORT

	•)r	
S	impson's Pharm	acy, Inc.	
amended, the undersigned FIRST: The name of	l corporation here f the corporation	eby submits the folk is	
S1	impson's Pharm	acy, Inc.	
		laws of Rhoo	
THIRD: The address	s of its registered	office in Rhode Islan	nd is
1200 Union Trust E	Building, Prov	idence, Rhode]	(sland
and the name of its regist			
FOURTH: If a foreig	gn corporation, the which it is incorp	e address of its prin orated is	cipal office in the state or
FIFTH: The characte			engaged in Rhode Island,
SIXTH: The names a	and respective add	resses of its directo	rs and officers are:
Name Ethel M. Simpson	Office Director	134 Naushon	Address Rd; Pawtucket, R.I.
David C. Simpson			d; Pawtucket, R.I.
		And the state of t	
*** ***********************************	Director		
Annual An	Director		
15 11444-144-14 11 4444-14-14-14-14-14-14-14-14-14-14-14-14	Director	-12-5144557	
David C. Simpson	President	74 Pequot R	d; Pawtucket, R.I.
Ethel M. Simpson	Vice Preside	nt 134 Naushon	Rd; Pawtucket, R.I.
Winifred Jager	Secretary	47 Kirk Dri	ve, Pawtucket, R.I.
David C. Simpson	Treasurer	74 Pequot R	d; Pawtucket, R.I.
SEVENTH: The aggreg by classes, par value of share	gate number of shees, shares without	ares which it has au par value, and series	thority to issue, itemized , if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	A Common		No Par Value
800	B Common		No Par Value

OCT 20 1977

Number of Shares	Class	Series	or Statement that Shares are without Par Value
50	A Common		No Par Value
200	B Common		No Par Value

Dated February 21 , 1977

Simpson's Pharmacy, Inc.

(NAME OF CORPORATION)

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1.02

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations Office of the secretary of state

ANNUAL REPORT

	0	F	
<u></u> S	impson's Phar	macy, Inc.	
amended, the undersigned First: The name of	corporation here the corporation i	by submits the follow	M44344-1944-1944-1944-194-194-194-194-194-19
			Island
-	of its registered a	office in Rhode Island	io
and the name of its registe		le Island at such addr	
FOURTH: If a foreig country under the laws of		e address of its princip	oal office in the state or
FIFTH: The character			gaged in Rhode Island,
SIXTH: The names a Name Ethel M. Simpson David C. Simpson David C. Simpson Ethel M. Simpson Winifred Jager	Director Director Director Director Director Director President Vice Preside	74 Pequot Rd; 74 Pequot Rd; 74 Pequot Rd; 74 Pequot Rd;	and officers are: ddrms d; Pawtucket, R.I. Pawtucket, R.I. Pawtucket, R.I. Pawtucket, R.I. Pawtucket, R.I.
David C. Simpson	Secretary Treasurer		Pawtucket, R.I.
SEVENTH: The aggreg by classes, par value of share Number of Shares	gate number of sha	ares which it has auth	ority to issue, itemized
200	A Common		No Par Value
800	B Common	AUG 23-76 \$15	No Par Value
AUG 1 0 1976		•	

Number of Shares	Class	Series	or Statement that Shares are without Par Value	
50	A Common		No Par Value	
200	B Common		No Par Value	

Dated February , 1975

Simpson's Pharmacy, Inc.

INAME OF CORPORATION)

By Saul Simpane

10) resident

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

		L REPORT OF	
e i			
	mpson's Pharma		***************************************
amended, the undersigne	d corporation her	eby submits the follow	
FIRST: The name of	of the corporation	is	
Si	mpson's Pharma	cy, Inc.	
SECOND: It is incom	porated under the	e laws of Rhode	Island
THIRD: The addres	s of its registered Building, Prov	office in Rhode Island idence, Rhode Is	d is
and the name of its regist	ered agent in Rho	de Island at such add	
FOURTH: If a forei country under the laws of		e address of its princi	ipal office in the state or
FIFTH: The charact	er of the business ir	n which it is actually e	ngaged in Rhode Island,
orieny scared, is	Pharmacv		
11 11 1-140041 - 141144 - 14074344111 - 1440-7-131-7-1414			(1))+-)+
O			
SIXTH: The names	and respective add	dresses of its directors	s and officers are:
Ethel M. Simpson			; Pawtucket, R.I.
David C. Simpson			Pawtucket, R.I.
11.146.44(4+4)+4 :::::::::::::::::::::::::::::::::	_		
4 (A) y (Director		
	Director		
\$4(\$)+(\$** 1: 1444(*)********************************	Director		
David C. Simpson			Pawtucket, R.I.
Ethel M. Simpson		entl34 Naushon Rd	; Pawtucket, R.I.
Winifred Jager	Secretary		, Pawtucket, R.I.
David C. Simpson	Treasurer		Pawtucket, R.I.
SEVENTH: The aggre by classes, par value of share	gate number of sh es, shares without	ares which it has auth par value, and series,	nority to issue, itemized if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	A Common		No Daw Halina
800	B Common	ě	No Par Value No Par Value
	D COMMON	ь МВ 23-76 <u>215 С</u>	NO PAI VAIUE
		3(2) 2(3)	

AUG 16 1976

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or shares, shares with	our har 's	aide, and serie	s, ii any, within a t	.1000, 15		
Number of Shares		Class	Series	٥	r State hares a	e per Share ment that re without Value
50	A	Common		No	Par	Value
200,	В	Common		No	Par	Value
1		•				
	! 1					
1	i					
, ,	1	•				
Dated February	, 19 ⁷		11.16/	CORPORAT	TON)	Inc.
!		Ву	its Ch	pone	£	

To be filed annually between January 1st and March 1st

State of Uhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

0F

Simp	oson's Pharmacy	, Inc.	
amended, the undersigne FIRST: The name of	d corporation here of the corporation i	7-1.1-118 of the by submits the following	General Laws 1956 as
			le Island
			nd is
1200 Union Trust B	Building. Provi	dence in Knode Isla dence i Bhode I	sland
and the name of its regist			
	gn corporation, the	address of its prin	ncipal office in the state or
FIFTH: The charact briefly stated, is			engaged in Rhode Island,
		.0	
SIXTH: The names	and respective add		ors and officers are:
Ethel M. Simpson		134 Naushon	Rd; Pawtucket, R.I.
David C. Simpson	Director	74 Pequot R	d; Pawtucket, R.I.
	Director		
(**************************************	-	** ************************************	
David C. Cimana			
David C. Simpson			d; Pawtucket, R.I.
Ethel M. Simpson Winifred Jager	Vice Preside		
David C. Simpson			ve, Pawtucket, R.I.
			B; Pawtucket, R.I.
by classes, par value of shar	egate number of sha es, shares without p	ares which it has au par value, and serie	thority to issue, itemized s, if any, within a class, is:
Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
200	A Common	A.	No Par Value
800	B Common	AUG 23-76 한	No Par Value
		일말	

AUG 1 0 1976

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1

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value		
50	A Common		No Par Value		
200	B Common		No Par Value		

Dated January 20 , 19 76

Simpson's Pharmacy, Inc.

V Waid Compson

To be filed annually between January 1st and March 1st

State of Mhode Island and Providence Plantations OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

***************************************	SIMPSON'S PHARM	MACY, INC.	
amended, the undersigned	visions of Section 7 corporation hereby the corporation is	submits the follow	
SECOND: It is incorp	porated under the la	ws of Rhode	Island
THIRD: The address	of its registered off	ice in Rhode Island	is
1200 Union Trust	Building, Prov	ridence, Rhode	Island
and the name of its registe	ered agent in Rhode Jacob Goodman	Island at such addr	ress is
FOURTH: If a foreig country under the laws of	n corporation, the a	ddress of its princip	oal office in the state or
FIFTH: The characte briefly stated, is Phar	r of the business in wi	hich it is actually en	gaged in Rhode Island,
SIXTH: The names a Name Ethel M. Simpson	nd respective addres	A	and officers are:
David C. Simpson			rcle, Rumford, R.I
10: 10: 1	Director		Pawtucket, R.I.
	Director		
	Director		
	Director		· · · · · · · · · · · · · · · · · · ·
David C. Simpson	President	6 Sutcliffe Ci	rcle, Rumford, R.I
Ethel M. Simpson	Vice President	.134 Naushon Rd	Pawtucket.R.I.
Winifred C. Jager			Pawtucket, R.I.
David C. Simpson	Treasurer		rcle, Rumford, R.I.
SEVENTH: The aggreg by classes, par value of share	ate number of share s, shares without par	es which it has author rvalue, and series, if	ority to issue, itemized any, within a class, is:
Number of Shares	Class	<u>Series</u>	Par Value per Share or Statement that Shares are without Par Value
200	Class A Common		no par
800	Class B Common		no par

JUN 13 1973 MA

Number of Shares	Cinss	Series_	Par Value per Share or Statement that Shares are without Par Value
5 0	Class A Common		no par
200	Class B Common		no par

Dated June 6 , 19 73

Simpson's Pharmacy, Inc.