



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 02/28/2021

Return completed form within 30 days to: Idaho Secretary of State

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise ID 83720

Annual Report: No filing fee if received by the due date.				Boise, ID 83720 Phone: (208) 334-2300	
SOS Control Number: 302227		Filing Status: Active	Filing Status: Active-Good Standing		N)
General Business Corporation (D)		Date Formed: 02/12	•	ormation Locale: ID	121
Name and Ma			(1) Add or Ch	nange Mailing Address:	<u> </u>
TECHPOWER	_				-
PO BOX 1532					: 2
BOISE, ID 83	701-1532				-
					AM
	gent (RA) and Registered	Office (RO) Address:	(2) Change R	A and/or RO Address:	Re
HELENE BLA					
6703 W FERN					ceive
BOISE, ID 83	709				<u> </u>
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	Note: The Regist	ered Office address must be	a physical Idaho addı	ress (no postal box).	۸٩
(3) New Regis	stered Agent (RA) Signat	ıre:			H
(0,11011110311			nted in item (2) above, the	new agent must sign here to accept the appoir	
(4) Corporations:	Enter names and business addr	esses (with zip code) of the Pre	esident, Vice President,	Secretary, Treasurer.	Ø
Title	Name	Business Addre	SS	City, State, Zip	<u>U</u>
President	Thomas W. Blasing	ame P. O. Box 153	32	Boise, Idaho 83701-1532	· 1
Vice Pres	. Mike Gibson	P. O. Box 153	32	Boise, Idaho 83701-1532	2 4
Secretary	Thomas W. Blasing	ame P. O. Box 153	32	Boise, Idaho 83701-1532	
Treasurer	Thomas W. Blasing	ame P. O. Box 153	32	Boise, Idaho 83701-1532	
(5) Board of Direct	ctors names and business address	sses (with zip code). Attach add	ditional sheet if necessa	ary.	0
Name		Business Address		City, State, Zip	H
Director	Helene B. Blasingam	e P. O. Box 153	32	Boise, Idaho 83701-1532	<u> </u>
	John S. Blasingame	P. O. Box 153		Boise, Idaho 83701-1532	
Director	Randy N. Jensen	P. O. Box 153	32	Boise, Idaho 83701-1532	
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	1				<u> </u>
(5) Signature:	Thomas U	V. Bleenjins	(6) Date:	February 3, 2021	rende
(7) Type/Print Nar	T1 1/ 0		(8) Title:	President	Ø

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

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