

Idaho Corporation Annual Report Form

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Return completed form within 30 days to:
Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street

Boise, ID 83720 Phone: (208) 334-2300

Annual Report: No filing fee if received by the due date.				Due no later than: 06/30/2024	
SOS Control Number: 108477 Non-Profit Corporation (D)		Filing Status: Active-Good Standing Date Formed: 06/01/1960 F		nation Locale: ID	202
Name and Mailing Address: CRANKERS, INC. (THE)		(1) Add or Change Mailing Address:		4 11	
PO BOX 442 LEWISTON, ID 83501-0442					:12
			<u> </u>		<u> </u>
ROSEANN RO 1901 17TH AV LEWISTON, IE	OWDEN /E	red Office (RO) Address:	(2) Change RA	and/or RO Address:	Receive
,		gistered Office address must be a ph	ysical Idaho addres	s (no postal box).	ed by
(3) New Regis	stered Agent (RA) Sign		n item (2) above, the ne	ew agent must sign here to accept the	appointme rh
(4) Corporations:	Enter names and business a	ddresses (with zip code) of the Presider	nt, Vice President, Se	ecretary, Treasurer.	- Hi i
Title	Name	Business Address		City, State, Zip	<u> </u>
President Vice Preside secttreas	nt Pat Emer'	van 1539 Powers ich 2318 23nd St Uden 1901 17th A	s Ave ve	Lewisten ID Clarkston WA Lewiston ID	8350 994 0 3 83501
(5) 8 - 1 (8)					<u> </u>
Name	ctors names and business add	dresses (with zip code). Attach addition Business Address	al sheet if necessary		Н
Gale Wilson		1 : 0 - 1 - 1 1	ve	City, State, Zip Lewiston ID	835001
Dick Kinne Frank Johnson Pat Emerich		3425 4th St D 1338 Chestnut 2318 22nd St	-	Lewiston II Clarkston Wi Clarkston Wi) 8350 (A 99403 A 99403
					retery Yaga
(5) Signature:	KOSONUM ?		(6) Date: 5/	10/04	₹ .

(8) Title:

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

Roseann

(7) Type/Print Name:

State

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