

## **Idaho Corporation Annual Report Form**

File online at: sosbiz.idaho.gov

## Return completed form within 30 days to:

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

For Office Use Only

B0763-4160

State

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	Boise, ID 83720				File #: 0005084774	2
	Phone: (208) 334-2300				Date Filed: 1/30/2023 10:07:00 AM	"
Annu	al Report: No filing f	ee if recei	ved by the due date.		Due no later than: 02/28/20	] W
SOS Control	Number: 435024	<u> </u>	Filing Status: Active-Goo	d Standing		
Non-Profit Corporation (D)		I	Date Formed: 02/27/2002 Formation Locale: ID			ü
Name and Mailing Address: SELWAY INSTITUTE, INC. PO BOX 929 BELLEVUE, ID 83313-0929			(1) Add or Change Mailing Address:			
TYLER H NEI	SS PL STE 105	tered Offic	ce (RO) Address:	(2) Change RA and	I/or RO Address:	AM Received
	stered Agent (RA) Si	gnature:_		em (2) above, the new a	agent must sign here to accept the appointm	O Pent H
(4) Corporations: Enter names and business address  Title Name			Business Address		City, State, Zip	
	MAURICE HORN	OCKER	P.O. BOX 929	F	RELLEVUE ID 83313	
SECY TRES.		OCKER	P.o. Box 929		RELLEVUE ID 83313	
(5) Board of Dire	ectors names and business	addresses (w	/ith zip code). Attach additional	sheet if necessary.		<del></del> 7
Name Bu		Busin	siness Address		City, State, Zip	
HOWARD STEVE	HASH PETERSON	NC 47	HWY93 77 BIVER RD		TNEYCREER NC 286 TUNEAU AK 99801	, 9
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						—— ўд УТУ
(5) Signature:	Namice Ar	uoche	u	(6) Date: / - 7	27-23	
(7) Type/Print Na	ame: MAURICE I	HORNE	OCKER	(8) Title: <b>BE</b> 5	IDENT	0 H

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