



Idaho Corporation Annual Report Form

File online at: sos.idaho.gov

Due no later than: 09/30/2019

Return completed form within 30 days to:

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

Annual Report: No filing fee if received by the due date.				Boise, ID 83720	
			Phone	: (208) 334-2300	2
SOS Control	Number: 512028	Filing Status: Active-C	Filing Status: Active-Good Standing		
Non-Profit Corporation (D)		Date Formed: 09/18/20	006 Forma	tion Locale: ID	19
	lailing Address: S NEW BEGINNINGS	S, INC.	(1) Add or Change	Mailing Address:	10:
16777 N WE NAMPA, ID					36
					AM
MINA M COC	OPER	stered Office (RO) Address:	(2) Change RA and	l/or RO Address:	Rece
16777 N WE NAMPA, ID					ìved
	Note: The	Registered Office address must be a p	hysical Idaho address (r	no postal box).	م ا
(3) New Regi	istered Agent (RA) S			`	H
(4) 0	·			igent must sign here to accept th	· · · · · · · · · · · · · · · · · · ·
		ess addresses (with zip code) of the President			
Title	Name	Business Address	W S 7 C	City, State, Zip	210215
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(5) Board of Dire	ectors names and business	s addresses (with zip code). Attach additio	nal sheet if necessary.		0
Name	1	Business Address		City, State, Zip	- H η
John K	emberton	1195. Valley D	2 Suite S	remora de 8	36860
YZEVIA	Pemberton	1195. Valley Dr	Suite (Jamba Il 8=	1686 ii
DIANA	STIRM	1195. Valley Dr	Suite 1	Janja JU83	68B #
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(5) Signature	rolor/ Ing	ch oner	(6) Date: 9 (2)	7/19	р 0
(7) Type/Print Na	me: PASTOR M	INAM COOPER	(8) Title:	IOR PASTOR	D

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