



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 09/30/2020

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.

SOS Control Number: 371017

Filing Status: Active-Good Standing

Non-Profit Corporation (D)

Date Formed: 09/12/1997

Formation Locale: ID

Name and Mailing Address:

MUIRFIELD HOMEOWNERS ASSOCIATION, INC.
937 MUIRFIELD LN
NAMPA, ID 83686-2873

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:

ROBERT C FRANK
937 MUIRFIELD LN
NAMPA, ID 83686

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment.

(4) Corporations: Enter names and business addresses (with zip code) of the President, Vice President, Secretary, Treasurer.

Title	Name	Business Address	City, State, Zip
President	Larry Grimes	936 Muirfield Lane, Nampa, Idaho	83686
V. President	Paul Alekseyev	843 Muirfield Lane, Nampa, Idaho	83686
Secretary	Katherine Brown	930 Muirfield Lane, Nampa, Idaho	83686
Treasurer	Robert Frank	937 Muirfield Lane, Nampa, Idaho	83686

(5) Board of Directors names and business addresses (with zip code). Attach additional sheet if necessary.

Name		Business Address	City, State, Zip
Title	Name	Business Address	City, State, Zip
President	Larry Grimes	936 Muirfield Lane, Nampa, Idaho	83686
V. President	Paul Alekseyev	843 Muirfield Lane, Nampa, Idaho	83686
Secretary	Katherine Brown	930 Muirfield Lane, Nampa, Idaho	83686
Treasurer	Robert Frank	937 Muirfield Lane, Nampa, Idaho	83686

(5) Signature: *Robert C. Frank*

(6) Date: *8/17/2020*

(7) Type/Print Name: *Robert C. Frank*

(8) Title: *TREASURER*

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

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