



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 07/31/2020

B0538-2789 09. 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	
SOS Contro	ol Number: 542409	Fi	ling Status: Active-Good	d Standing		2
Non-Profit Corporation (D)		Da	Date Formed: 07/10/2008 Fo		nation Locale: ID	2
NEW HOPE 425 2ND AV	Mailing Address: E TRANSITION CENTER VE N LS, ID 83301-5961	, INC.		(1) Add or Char	nge Mailing Address:	11:21 AM
KENNETH (425 2ND A)		ered Office	(RO) Address:	(2) Change RA Karan 4350 Twoin	and/or RO Address: Condew and one W Jalls, Daho 83301	Received
	Note: The R	egistered Off	ice address must be a physi			Λq
(3) New Re	gistered Agent (RA) Sig	nature:	Karen C If a new agent is appointed in ite	ordie m (2) above, the n	ew agent must sign here to accept the appo	н
(4) Corporation	ns: Enter names and business	addresses (w	ith zip code) of the President,	Vice President, S	ecretary, Treasurer.	
Title	Name		Business Address		City, State, Zip	
breasyn D. P.	Janetta for	nes Hinton Pesta	425 2nd la 425 2nd a 425 2nd a	LN. WEN	Juin talls, If S Juin falls, IS. S Truck Folls &	(330) (330) (233)
	Directors names and business a		<u> </u>	sheet if necessary	· · · · · · · · · · · · · · · · · · ·	<u>Q</u>
		- 1/2	Business Address		City, State, Zip	
(5) Signature:	La Kodent Le Kono Le De Hillinex	1 426	Sad Core N 5 Jul ave N 5 Jul ave	1/-	Twin Falls of Twin Falls of Twin Falls of	Lawer en
(7) Type/Print I	Name: Karen	Car	dier	(8) Title:	readed	

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