



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 02/28/2021

Return completed form within 30 days to:

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

Annual Report: No filing fee if received by the due date.					Phone: (208) 334-2300	
SOS Control Number: 251849 Non-Profit Corporation (D)			Filing Status: Active-Good Standing			
			Date Formed: 02/18/1986		Formation Locale: ID	
Name and Mailing Address: (1) Add or Change Mailing Address					ange Mailing Address:	ω.
HAYDEN UNITED MINISTRIES, INCORPORATED 9485 N MAPLE ST HAYDEN LAKE, ID 83835-9223						4
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HAYDEN LAK	E, ID 83835-9223					PM
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	jent (RA) and Register	ed Offic	e (RO) Address:	(2) Change RA	A and/or RO Address:	ŭ m
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9485 MAPLE A						eived
HAYDEN LAKI	=, ID 83835					Ď
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	Note: The Rec	istered Of	fice address must be a phys	ical Idaho addre	ess (no postal box).	κ.
(0) Man Danie					,	ij
(3) New Regis	tered Agent (RA) Sign	ature:	If a new agent is appointed in it	em (2) above, the	new agent must sign here to accept th	e appointr ile nt
(4) Corporations:	Enter names and business a	dresses (v	with zip code) of the President,			r Q
Title	Name		Business Address	· ·	City, State, Zip	-
FRESIDENT	L	7 1 1	9485 N MAPLE	5 <i>1</i> .	HAYDEN LAKE ID	8383 \$
SFERETARY JANE BUTTS			9485 N MAPLE	ST	ITAYDEN LAKE ID	
TREASURER	MARION BREND	<u> </u>	9485 N. MAPLES	S7	HAYDEN LAKE ID	838 35 -
(5) Board of Direct	tors names and business ada	raaaa (wii	Attack additional			<u> </u>
Name	tors marries and business add	_,	th zip code). Attach additional	Sneet II necessa		<u>v</u>
SAME AS ABOVE			ess Address		City, State, Zip	
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(5) Signature:	Marion B	tend	is	(6) Date:	2-17-21	Ф
<u> </u>					REASURER	De
Instructions: Le	gibly complete the form above	e. Sign and	d date this form and return to the	ne address provid	ded above.	Denn