

Idaho Corporation Annual Report Form

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For Office Use Only -FILED-

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

File #: 0004926654

Date Filed: 9/28/2022 10:43:00 AM

Due no later than: 09/30/2022

B0736-3015 09/28/2022, 10:43

Annual R	eport: No f	iling fee if	received by	the due date.

SOS Control Number: 344893

Filing Status: Active-Good Standing

General Business Corporation (D)

Date Formed: 09/13/1995 Formation Locale: ID

Name and Mailing Address:

HALF-BREED, INCORPORATED

PO BOX 7113

KENNEWICK, WA 99336-0614

(1) Add or Change Mailing Address:

						AM
R D WATSON			Address:	(2) Change RA	and/or RO Address:	ወ Ω ወ
5431 N GOVERNMENT WAY STE 101 COEUR D ALENE, ID 83815 (KOOTENAI COUNTY) \(\int \) \(\int \)					A) IVed
	Note: The Regi	stered Office addr	ess must be a pl	nysical Idaho addres	ss (no postal box).	Λq
(3) New Regis	stered Agent (RA) Signa		N A	in item (2) above, the n	ew agent must sign here to accept the app	Ointment H
(4) Corporations:	Enter names and business ad					H
Title	Name	Business Address			City, State, Zip	
President Vice President Secretory IRECSURER (5) Board of Direct	Timothy A Buc	to Pio	BOX 7113 BOX 7113 BOX 7113	3	100.61.700	99336 0 99336 1 99336 1 99336 1
Name	Business Address				City, State, Zip	————
Timothy a Buche		P. D. BOX 7113		Kennewick, WASH	99336 D 0 0 0 0 0	
(5) Signature:	emotte A.	Buc Ho	, 8	(6) Date: (8) Title:	ept. The 20	122 of
	egibly complete the form above		form and return t		ed above.	