



## **Idaho Corporation Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 05/31/2020

## Return completed form within 30 days to light of State

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

Ar	nnual Report: No filing fo	Boise, ID 83720 Phone: (208) 334-2300	74/	
SOS Control Number: 210968 Non-Profit Corporation (D)		Filing Status: Active-Good Date Formed: 05/11/1981	Standing Formation Locale: ID	
HARRISO 7393 E TH	I Mailing Address: N COMMUNITY OLD TIM IOMPSON LAKE RD N, ID 83833-7704	E PICNIC, INC.	(1) Add or Change Mailing Address:	E C
Registered Agent (RA) and Registered MARIAN JONES 7393 E THOMPSON LAKE RD HARRISON, ID 83833		ered Office (RO) Address:	Office (RO) Address: (2) Change RA and/or RO Address:	
		registered Office address must be a physic	al Idaho address (no postal box).	ر م ت
(3) New R	egistered Agent (RA) Sig		n (2) at ove, the new agent must sign here to accept the ap	an auntmant
(4) Corporati	ions: Enter names and business	addresses (with zip code) of the President, V		·
Title	Name	Business Address	City, State, Zip	<u></u>
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				М.
(5) Board of	Directors names and business a	addresses (with zip code). Attach additional s	neet if necessary.	<del>-</del>
Name E		Business Address	City, State, Zip	3
PRES, FRED Muhs		54493 HWY 97	St. MARIES Idaho	83861
Sec. MARIAN TONES 17		7393 E ThompsoNLAKE	ROAD HARRISON TOAMOS	3833
TREAS. SUSANNE HOSKINSON		ON P.O BOX 151	HARRISON TURKO	83833°
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<u> </u>	<del></del>			
(5) Signature	Marian L	(ponos)	(6) Date: 4 - 21 - 20 20	
(7) Type/Prin	it Name: MARIAN	TONES	(6) Date: 4-21-2020 (8) Title: Secretary	
		ove. Sign and date this form and return to the	•	