



## **Idaho Corporation Annual Report Form**

File online at: sosbiz.idaho.gov

Due no later than: 10/31/2021

## Annual Report: No filing fee if received by the due date.

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Return completed form with	in 30 days
Idaho Secretary of State	· .
Attn: Annual Reports	
450 North 4th Street	2 2
Boise ID 83720	<u> </u>

		Phor	Phone: (208) 334-2300		
SOS Control	Number: 513448	Filing Status: Active-Good Standing			1
Non-Profit Corporation (D)		Date Formed: 10/13/2006 Formation		ation Locale: ID	<u> </u>
	MON SONFLY PL	OWNERS' ASSOCIATION, INC.	6700 1 STE 1	ge Mailing Address: V. Linofr RQ. 56 # 181 IN IJAho 83646	:51 AM Re
John Stellmon 1509 DRAGO EAGLE, ID 83	N FLY PLACE 3616		ical Idaho address		ceived by ID S
			tem (2) above, the ne	w agent must sign here to accept the appo	ointmer <b>n</b> Ω
	Enter names and business a	addresses (with zip code) of the President, Vice President, Secretary, Treasurer.			
Title	Name	Business Address		City, State, Zip	(t
PRES.	Kirsten WRigh	T 4112 Wast QUA	in Hill Ct,	Boiss Id 83703	ary
V. sres	WILLIAM CASEY BUL	LOCK 3490 N. lesliew	<b>/</b> AY	Meridian Id 83644	<u> </u>
54 (74	JOHN M. STELLIM	ON 1509 N. DELGONAY	PL	EXGLS Id 83616	_
TREAS.	MATTHEW JAMES G	REGORY 5930 N. BOTH	cecci Aug	MERIDIAN IC 83646	<del>- 0</del>
(5) Board of Direct	ctors names and business add	dresses (with zip code). Attach additional			Ø
Name		Business Address		City, State, Zip	rt
DAN: LE	4 CLMARENA	603 E. Heritage Par	ZIC ST.	Meridian Id. 036	46 dt
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(5) Signature:	plu W.	Ellum	(6) Date: /O	/19/2021	
(7) Type/Print/Nar	ne JOHN M. 5	tgumon	(8) Title: 5	CRETARY	)en
Instructions: Le	egibly complete the form abov	/ e. Sign and date this form and return to tl	he address provided	l above.	ne