



Idaho Corporation Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 10/31/2018

Reporting Year: 2018

Return completed form within 30 days to

Idaho Secretary of State Attn: Annual Reports

Annual Report: No filing fee if received by due date. If reinstatement is required, the reinstatement fee is \$30.00. 700 West Jefferson, E205 450 North 4th Street					9/22
			Phor	ie: (208) 334-2300	N 2
SOS Control Number: 249366 Filing Status: Active-Good Standing					
Non-Profit Corporation (D)		Date Formed: 10/28/198	Date Formed: 10/28/1985 For		œ
Name and	Mailing Address:		(1) Add or Change Mailing Address:		
DRIFTWOO	DD POINT COOPERATIVE	ASSOCIATION, INC.			12
	MERFIELD LOOP				н
HAYDEN, II	D 83835				PM
					ফু
Registered	Agent (RA) and Register	red Office (RO) Address:	(2) Channa DA	and/or DO Addross	δ
RON BRIG	-	,	(2) Change RA	and/or RO Address:	ь. Ф
8058 SUMN	MERFIELD		:		ived
HAYDEN, II	D 83835				Ď.
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			gradien and the gradient and the	and the second s	s - second - se
		ote: The Registered Office address m	ust be an Idaho ad	dress.	Ð
(3) New Re	gistered Agent (RA) Sign	ature:			23
	If a new agent is ap	pointed in item (2) above, the new agen	t must sign here to a	ccept the appointment.	Ō
(4) Corporatio	ns: Enter names and business a	ddresses (with zip code) of the Presiden	it, Vice President, Se	ecretary, Treasurer.	
Title	Name	Business Address		City, State, Zip	
Pres.	100/ E/900	24327 Maxu	VELL AV	Liberty Lake, WA	<i>99019</i> w
Treas	Ron Briggs	8058 Summe	rtield Lp	Hayden, Id 838	35
Sec.	Pote O' Dow	1 15355 N. Chi	de Trail	Prescott AZ 86	505 °
Dir	Bob Benson	9437 Syndara	Ct.	Harrison, Id 8-30	<u> 833 </u>
(5) Board of D	Directors names and business add	dress (with zip code). Attach additional s	sheet if necessary.		76
Name Bus		Business Address	ness Address		d
					0
					<u>o</u>
	1 100			1.41.6	We I
(5) Signature:	Hon Dugg	0	(6) Date: / 6	18/18	
(7) Type/Print i	Name: RAN PRIVA	5 5	(8) Title: /6/	18/18	<u> </u>
Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinsta					
	e this form and return to the addre				
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