



## Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 10/31/2020

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

B0538-9255 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

SOS Control Number: 249312	Filing Status:	Active-Good Standing
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Formation Locale: ID Non-Profit Corporation (D) Date Formed: 10/25/1985

(1) Add or Change Mailing Address:

## Name and Mailing Address:

**CHAPTER #18, DISABLED AMERICAN VETERANS DEPARTMENT** 

OF IDAHO, INCORPORATED

908A MAGNOLIA ST

LEWISTON, ID 83501-4752

Registered Agent (RA) and Registered Office (RO) Address:

**ROBERT T WHITLOCK** 1129 BIGHORN DR LEWISTON, ID 83501

(2) Change RA and/or RO Address:

920 Bryden Ave Apt 114 Lewiston, ID 83501

Note: The Registered Office address must be a physical Idaho address (no postal

(3) New Registered Agent (RA) Signature

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment

litle little	Name	Business Address	City, State, Zip
Aresident	Robert Whitlock	920 Bryder Ave Apt 114	Lewiston, ID 835W
•	+ Don Ericson	1158 Idaho St.	Lewisten, ID 83501
	Scott Hemphill	9084 Magnolia St	Cerviston, ID 83501
Secretary	· · · · · · · · · · · · · · · · · · ·	108A Magnoliu St	Lewiston, ED 83501

(5) Board of Directors names and business addresses (with zip code). Attach additional sheet if necessary.

Name	Business Address	City, State, Zip	

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(5)	Signature	: <b>Y</b>

Robert M. Whitlock

(6) Date:

(7) Type/Print Name:

Instructions: Legibly complete the form above. Sign and date this form and return to the address provided above.

nge Penney

11/05/2020 11:17 AM, Received