

Idaho Corporation Annual Report Form

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For Office Use Only

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File #: 0005411852

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

Annual Report: No filing fee if received by the due date. Due no later than:					N
	at report. No ming to	o ii received by the due date.		Due no later than.	09/30/20 23
SOS Control Number: 569699		Filing Status: Active-Ge	Filing Status: Active-Good Standing		2
General Business Corporation (D)		Date Formed: 09/27/20	2010 Formation Locale: ID		23
Name and Ma	ailing Address:		(1) Add or Change M	failing Address:	4
	NTERPRISES, INC.				 No
DALE WILLIA	MSON, PH.D.				20
308 N MIDLA	ND BLVD				щ
NAMPA, ID 8	33651-6520				PM
Pagistared A	gent (PA) and Pagist	ered Office (RO) Address:			73 —
DALE WILLIA	- , ,	ered Office (NO) Address.	(2) Change RA and/or RO Address:		ω Ω
	ND BLVD APT 3				H;
NAMPA, ID 8					ived
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	Note: The R	egistered Office address must be a ph	vsical Idaho address (no	postal box).	ላ
(0) Name Danie			,	• ,	OH,
(3) New Regis	stered Agent (RA) Sig		n item (2) above, the new ac	ent must sign here to accept th	
(4) Corporations:	Enter names and husiness	addresses (with zip code) of the Preside			Q Q
Title		Business Address			
Thos.	Name	Dusiness Address	7 41 14	ity, State, Zip	7(1/0
TAUX	Wall Will	andon 30 of Mud	LAND VILVO	Campa, ID 8:	3651 H
					
					D
(5) Board of Dire	ectors names and business a	ddresses (with zip code). Attach addition	nal sheet if necessary.		Ĥ
Name		Business Address		City, State, Zip	요 고
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(5) 8:	ale Williams		11 F	11. 11700	3 ×
			(6) Date: (6)	mber 26,202	<u></u>
(7) Type/Print Na	me: Nale Willi	umson	(8) Title: N Kux	S	

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