



## **Idaho Corporation Annual Report Form**

File online at: SOSBIZ.idaho.gov

Due on/Before: 03/31/2019

Reporting Year: 2018

	Ø
	o
	~
	ı
	-4
	监
Return completed form within 30 o	days to밀
Idaho Secretary of State	ت
idding of other	

Attn: Annual Reports 450 North 4th Street Boise, ID 83702

Phone: (208) 334-2300

Annual Report: No filing fee if received by due date.	
If reinstatement is required, the reinstatement fee is \$30.00	).

**SOS Control Number:** 502105 Non-Profit Corporation (D) Filing Status: Active-Good Standing

Date Formed: 03/08/2006

Formation Locale: ID

Name and Mailing Address	Name	and	<b>Mailing</b>	<b>Address</b>
--------------------------	------	-----	----------------	----------------

POST ID. - 01 VETERANS OF THE VIETNAM WAR, INC.

238 E. 300 N.

**RUPERT, ID 83350** 

(1) Add or Change Mailing Address:

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

LARRY COTTOM 238 E 300 N RUPERT, ID 83350 (2) Change RA and/or RO Address:

Note: The Registered Office address must be an Idaho address.

## (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.

(4) Corporations: Enter names and business addresses (with zip code) of the President, Vice President, Secretary, Treasurer.

Title	Name	Business Address	City, State, Zip	
COMMAND.	P GARY HATHAWAY	1746 Ahmo AUL	Burlay Id 83318	
Vice	houis Kimmett	321 N 100 E	Rupart Id 83350	
SecR. TAR	YLARRY COTTOM	238 E 300 N	RUPIRT Id 83350	, N
TRIASUR		238 E 300 N	Rups RT Id 83350	<i></i>
	——————————————————————————————————————			

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

Name			Business Address	City, State, Zip	Ø
					ct
SAME	H<	ABOVE			- w
217111		11111			D
		, , , , , ,			
<del></del>	$\overline{}$	<del></del>	<del>,</del>		63

(5)	Signature:	
-----	------------	--

any Cettan

(6) Date:

27-2019

(7) Type/Print Name:

LALLY COTTON

(8) Title: SecR. TARY 7

TRIASURE

Instructions: Legibly complete the form above. Enclose a check made payable to the Idaho Secretary of State for \$30 if reinstating. Sign and date this form and return to the address provided above.

repce Denney

03/04/2019

Received