



## **Idaho Corporation Annual Report Form**

File online at: SOSBIZ.idaho.gov

Due no later than: 04/30/2019

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

## Return completed form within 30 days to:

64 144 144

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

A	muai Report. No ming ree	ir received by the due date.	Pho	one: (208) 334-2300	Hadis No.
SOS Contr	ol Number: 5915	Filing Status: Active-G	Filing Status: Active-Good Standing		
Non-Profit (	Corporation (D)	Date Formed: 04/02/19	901 For	mation Locale: ID	4.4
Name and Mailing Address:			(1) Add or Cha	nge Mailing Address:	L.
	ND IRRIGATION COMPAN	Υ			Ç <sub>a</sub> r
	LEVELAND RD				
PRESTON, ID 83263					ii dhe No
			- American Company		
	d Agent (RA) and Register	red Office (RO) Address:	(2) Change RA	and/or RO Address:	
BLAINE BU					ļ:
	LEVELAND RD	•			41
PRESTON	, ID 83263				i.
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	Note: The Rec	gistered Office address must be a pl	arbbe adehl leaieve	se (no poetal hov)	N
		·	ry orour rounce accessor	oo (no postar box).	
(3) New Re	egistered Agent (RA) Sign	ature:		new agent must sign here to accept the appointn	
(4) Corporation	one: Enter names and hydrones				nent:
(4) Corporations: Enter names and business addresses (with zip code) of the Preside			ent, vice President, S		
Title	Name	Business Address		City, State, Zip	
<del></del>					
(5) Board of D	Directors names and business add	dresses (with zip code). Attach additio	nal sheet if necessar	y.	
Name Busin		Business Address		City, State, Zip	
		14325 N. CLEV	ELAND	IRE STON, Ids	3326
		13585 N CLEV	ELANDE	d PRESION, Id 83%	163
CLINT SKINNER 13			ELAND RO		263
JOHN MUSSLER 14 KENT BECKSTEAD 26		14745 N. HWY3		THATCHER Id 83	283
KENI	BECKSIEAD	2665 N 4400 30	ui H	WESTON, I'd 832	36
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		1 2		1 1	
5) Signature:	Tarrer W A	Liagues	(6) Date:	12/19	
7) Type/Print	Name: LARRY T	H1991NS	ره (8) Title: 5	CRETARY/DIREC	TINK
			<u></u>		

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