

## **Idaho Corporation Annual Report Form**

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For Office Use Only

## -FILED-

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Due no later than: 05/31/202 4

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.

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SOS Control Number: 304583 Non-Profit Corporation (D)		Filing Status: Active-Good Standing  Date Formed: 05/01/1992 Formation Locale: ID		motion Locale: ID	2
		Date Formed, 05/01/198			
Name and Mailing Address:  IDAHO PAINTBALL ASSOCIATION, INC. (THE)					<u> </u>
7130 W MCGLOCHLIN S	·	nc)			
BOISE, ID 83709-5542					ņ
					<u>)</u>
Registered Agent (RA)	and Registered Off	ice (RO) Address:	(2) Change RA	and/or RO Address:	고 M
DOUGLAS CRAVEN 7130 W MCGLOCHLIN ST					Ċ
BOISE, ID 83709					۲
					0 0
	Note: The Registered	Office address must be a phy	sical Idaho addres	ss (no postal box).	ğ
(3) New Registered Age	nt (RA) Signature:				
		If a new agent is appointed in	item (2) above, the n	ew agent must sign here to accept the appointment.	— <del>`</del> ——н
(4) Corporations: Enter names	and business addresses	s (with zip code) of the Presider	t, Vice President, S	ecretary, Treasurer.	
Title Name	Title Name			City, State, Zip	
PRESIDEN DO	6- CRAVEN	1130 W. MC	SLOCHLIN	ST. BOIST, ID 83709	11₀
SECRETARY DORU	THY CKANEN	SAME			H
					— <u> </u> ₫
(5) Board of Directors names a	and business addresses (	(with zip code). Attach addition	al sheet if necessary	y.	<u> </u>
		ness Address		City, State, Zip	٦
					<u> </u>
		<u> </u>			— <u>ř</u>
					— a
(5) Signature:	w 2 2 9. Q	nven	(6) Date:	1-17-24	
(7) Type/Print Name: DOVG CRAYEN			(8) Title: PRESIDENT		 H
Instructions: Legibly complet	te the form above. Sign	and date this form and return to	the address provide	ed above.	V,