



Idaho Corporation Annual Report Form

File online at: sos.idaho.gov

Due no later than: 02/28/2020

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

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: 176585		Filing Status: Active-Go	od Standing	<u> </u>	2
Non-Profit Corporation (D)		Date Formed: 02/08/197	Date Formed: 02/08/1977 Form		20
ANNIE GRE	ON, INC.	OWNERS' AND WATER USERS	(1) Add or Cha	nge Mailing Address:	4:06
PO BOX 14 HAGERMA	5 N, ID 83332-0145				PM :
JOHN MCC 121 QUICK	• , ,	istered Office (RO) Address:	(2) Change RA	Received	
(3) New Re	Note: The gistered Agent (RA) S	e Registered Office address must be a phy			by ID
		If a new agent is appointed in	item (2) above, the r	ew agent must sign here to accept th	e appointment.
	ns: Enter names and busine	ess addresses (with zip code) of the Presiden	t, Vice President, S	Secretary, Treasurer.	
Title	Name	Business Address		City, State, Zip	7
Presiden	f John McCack	en 121 Quick silver	Ave	Hagerman, ID 833.	
V. Pres.	Steve Bland	150 Quicksilve	r Ayl	Hagerman IQ	83332
Secs.	John McCrack		v Ave	Hagernan ID	8333Z
Treas.	John MiCral		v Ave	Hagerman ID 8	17332
	irectors names and busines	s addresses (with zip code). Attach additiona	ıl sheet if necessar	y. /	Н
Name		Business Address	siness Address		Ø
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(5) Signature:	John Al	Jacken	(6) Date: /	-27-2020	en ce
(7) Type/Print I	vame: John M	Cracken	(8) Title:	resident/Treasu	NC Denn
Instructions:	Legibly complete the form	above. Sign and date this form and return to	the address provid-	/ ed above.	nn