

## **Idaho Corporation Annual Report Form**

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## -FILED-

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Return completed form within 30 days to:

(7) Type/Print Name:

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

Phone: (208) 334-2300

An	nual Report: No filin	g fee if received by the due date.	Due no later than	04/30/2024	
SOS Control Number: 539678		Filing Status: Active-Good	d Standing	African Program	
Non-Profit Corporation (D)		Date Formed: 04/30/2008	Formation Locale: ID	Formation Locale: ID	
	Mailing Address:		(1) Add or Change Mailing Address:	्रीराज्यस्थितः	
	CHRISTIAN SCHOOL		in HI  -curlita		
	DDLETON RD				
NAMPA, IL	83651-7514				
TIM DOUG	SHTY ODLETON RD	gistered Office (RO) Address:	(2) Change RA and/or RO Address:	## 0 0 14- 5 0	
	Note: Ti	ne Registered Office address must be a physic	cal Idaho address (no postal box).	Section 1	
(3) New Re	egistered Agent (RA)	Signature:			
		If a new agent is appointed in ite	m (2) above the new agent must sign here to accept t	the appointment	
(4) Corporation	ons: Enter names and busin	ness addresses (with zip code) of the President, \	Vice President, Secretary, Treasurer.	200 (1900) 200 (1900) 200 (1900)	
Title	Name	Business Address	City, State, Zip	י ליינים	
PAG.	Calyan Chr	ston School 20 N. Middle	eton Rd Nampa Id. 8	365+	
Pres	Tim Dou	ghty 1210 N. Middl	eten Rd Nampa, ID 8:	3651 gradus	
				Entry (	
(5) Board of I	Directors names and busine	ess addresses (with zip code). Attach additional s	sheet if necessary.	- Inter	
Name		Business Address	City, State, Zip	Product	
Tim Doughton pres.		ces. 1210 N. middleton	Rd. Nampa Id.	83651	
Ron	Ward	Sec. 12 W N. middletor	Rd Nampa Id.	83651	
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				Pol <sup>e</sup> lat	
(5) Signature:	1.	1 com ht	(6) Date: $b - 13 - 24$	H	

(8) Title:

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