



## Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 12/31/2021

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

Return completed form within 30 days to 11

01/31/2022 | 1:27

Received

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

Phone: (208) 334-2300

SOS Control Number: 266452

Filing Status: Active-Good Standing

General Business Corporation (D)

Date Formed: 12/31/1987

Formation Locale: ID

Name and Mailing Address:

T. W. BLASINGAME COMPANY, INC.

PO BOX 1532

BOISE, ID 83701-1532

(1) Add or Change Mailing Address:

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

**HELENE BLASINGAME** 6703 W FERNWOOD DR **BOISE, ID 83709** 

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(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	
President	Thomas W. Blasingame	Post Office Box 1532	Boise, Idaho 83701-1532	
Vice Pres	Mike Gibson	Post Office Box 1532	Boise, Idaho 83701-1532	
Secretary	Thomas W. Blasingame	Post Office Box 1532	Boise, Idaho 83701-1532	
Treasurer	Thomas W. Blasingame	Post Office Box 1532	Boise, Idaho 83701-1532	

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

Name		Business Address	City, State, Zip	Ø
Director	Helene Blasingame	Post Office Box 1532	Boise, Idaho 83701-1532	<del>त</del> (१
Director	Randy M. Jensen	Post Office Box 1532	Boise, Idaho 83701-1532	4
Director	John S. Blasingame	Post Office Box 1532	Boise, Idaho 83701-1532	<b></b>
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(5) Signature:

mes W. Bleengen

(6) Date:

1-26-2022

(7) Type/Print Name:

Thomas W. Blasingame

(8) Title:

President

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