

Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Return completed form within 30 days to:

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

Phone: (208) 334-2300

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

For Office Use Only

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OS Control Number: 274362		Filing Status: Active-Good Standing	
neral Business Corporation (D) Da		Date Formed: 12/20/1988 F	Formation Locale: ID
lame and Mailing Address:	******	(1) Add or (Change Mailing Address:
ODD DISTRIBUTORS, INC.			
08 E DAKOTA AVE			
T MARIES, ID 83861-2137			
legistered Agent (RA) and Regist	ered Offic	ce (RO) Address:	DA and/or DO Address:
MARCUS J TODD		(2) Change	RA and/or RO Address:
08 E DAKOTA AVE			
T MARIES, ID 83861			
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Notes The F		New and the control of the control o	Anna Cara and Harris
Note: The F	registerea C	Office address must be a physical Idaho add	aress (no postal box).
) New Registered Agent (RA) Sig	jnature:_		
			he new agent must sign here to accept the appointment
	addresses	(with zip code) of the President, Vice Presiden	
itle Name Pres Todd, Marcus		Business Address	City, State, Zip
10 - 11 (11.00)	S.	732 Clm Street	St marie, It 83841
reaster Todd - Ahn h.	7,000	208 & Dakete	St Marie It 83861
reas fact form	·	700 0 10 202	The final of the state of the s
) Board of Directors names and business a	addresses (w	vith zip code). Attach additional sheet if neces	sary.
ame	Busin	ess Address	City, State, Zip
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0 0 0			
Signature: Or Land		(6) Date:	11-5-22
A. I.	1/		1
Type/Print Name: Ann L. Ida	14	(8) Title: S	oc I la
nstructions: Legibly complete the form ab	ove. Sign ar	nd date this form and return to the address pro	ovided above.
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