

## **Idaho Corporation Annual Report Form**

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## -FILED-

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Due no later than: 08/31/202

(5) Signature:

(7) Type/Print Name:

Return completed form within 30 days to: Idaho Secretary of State Attn: Annual Reports

Boise, ID 83720 Phone: (208) 334-2300

450 North 4th Street

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

SOS Control Number: 4374611			Filing Status: Active-Good Standing			,20
Non-Profit Corporation (D)			Date Formed: 08/09/2021 Formation Locale: ID		nation Locale: ID	124
Name and Mailing Address:  Connelly Subdivision Water Users Association Inc.  CHRISTOPHER MASON						1 4:23
1430 CONNE EMMETT, ID						PM
Registered A Christopher M 1430 CONNE EMMETT, ID	LLY LANE	ered Office	e (RO) Address:	(2) Change RA a	and/or RO Address:	Received
	Note: The Re	egistered Of	fice address must be a physi	cal Idaho address	s (no postal box).	λq
(3) New Regis	stered Agent (RA) Sig	nature:			* 144	<u></u>
	· · · · · · · · · · · · · · · · · · ·		If a new agent is appointed in ite	em (2) above, the ne	w agent must sign here to accept the ap	pointmen <b>#+</b>
(4) Corporations:	Enter names and business	addresses (w	vith zip code) of the President,	Vice President, Se	cretary, Treasurer.	<u>,</u>
Title	Name		Business Address		City, State, Zip	
President			1430 Councily 1	Ane	Emmett, ID 836	
VP	Chris Bar	ner	1,		Emmett, ID 836	017
Sec.	1 Chang Mil	25ac	11			<del></del>
(5) Board of Dire	actors names and husiness ar	dresses (wit		sheet if necessary		<u> </u>
(5) Board of Directors names and business addresses (with zip code). Attach additional sheet if necessary.  Name  Business Address					City, State, Zip	<u>Н</u>
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Chris	Dar Jur				Emmett, ID 8361	<u> 7</u>
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(6) Date:

(8) Title:

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

State