



## Idaho Corporation Annual Report Form

File online at: SOSBIZ.idaho.gov

Return completed form within 30 days to

0.19	Due on/Before: 02/28/2	Reporting Year: 20	Attn: Annual Reports	2 N
Annual Res	Annual Report: No filing fee if received by due date.  450 North 4th Street Boise, ID 83702			
If reinstatement is required, the reinstatement fee is \$30.00.  Phone: (208) 334-2300				Z
Ti Temotaten	Terre is required, and reme		Priorie. (206) 334-2300	
<b>SOS Control</b>	Number: 147057	Filing Status: Active-Good	Standing	<u>N</u>
Non-Profit Co	propration (D)	Date Formed: 02/17/1972	Formation Locale: ID	2
Name and M	lailing Address:		(1) Add or Change Mailing Address:	عا
	APTER #762 OF AARP, II	NC		••
3624 VISTA				<u> </u>
NAMPA, ID				_
10 ((0))				}
Registered /	Agent (RA) and Register	red Office (RO) Address:	(0) Observe BA and/or BO Address.	<del></del> . መ ር
C T CORPORATION SYSTEM				
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BOISE, ID 8				< 0
DOIOL, ID O				Ë
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	N	ote: The Registered Office address must	t be an Idaho address.	
(3) New Red	istered Agent (RA) Sign	nature:		Ę
(4)			and the first of a second the second terms of	_
		ppointed in item (2) above, the new agent m		ე ———
		addresses (with zip code) of the President, \		
Title	Name	Business Address	City, State, Zip	
fres	PECK, Lest		Nampe Id 83686	
V. Pres	Fehringen Gev	-vy 15505 Castle		2
Treas	Peck Mary	7. 3624 Vista D.	Name Id 83686	
Secy	Pock Mary	1. 3624 Vista, Dr.	Namage Id 83686	
	•	dress (with zip code). Attach additional she	et if necessary.	Ì
Name	<del></del>	Business Address	City, State, Zip	7
None	e			
	2 0 0			
(5) Signature:	Mary & Jack		(6) Date: 7.6-2819	
(7) Type/Print N	lame: Mary 7. Per	:k	(8) Title: Seiy-Treas	1
Instructions:	Legibly complete the form about	ve. Enclose a check made payable to the	Idaho Secretary of State for \$30 if reinstating.	i
Sign and date	this form and return to the addr	ess provided above.		•
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