



Idaho Limited Liability Company Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 09/30/2021

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

Port Form

Return completed form within 30 days to:
Idaho Secretary of State
Attn: Annual Reports
450 North 4th Street
Boise, ID 83720
Phone: (208) 334-2300

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imited Liability (ımber: 3632403	Filing St	atus: Active-Existing			
imited Liability Company (D)		Date Fo	rmed: 09/30/2019	Formation Locale: ID		
Name and Maili	ng Address:		(1) A	dd or Change Mailin	g Address:	
Bonneville Point	Radio Repeater S	ite, LLC				
CHARLES POU	LSEN					
7122 W DIAMOI						
BOISE, ID 8370	9-4941					
Registered Age	nt (RA) and Regi	stered Office (RO)	Address: (2) C	hange RA and/or RO	D Address:	
CHARLES POU	LSEN					
7122 W DIAMOI	ND ST					
BOISE, ID 8370	9					
	 				adad basis	
	Note: Ine	Registered Office add	lress must be a physical Ida	ino address (no po	stai box).	
(3) New Registe	ered Agent (RA) S					
		If a new	v agent is appointed in item (2) a	bove, the new agent i	must sign here to accept the app	pointment
(4) Limited Liability	y Companies: Enter	names and addresse	es of Managers OR Membe	ers. Do NOT put 's	same as last year' or 'sam	e as above
These will not be a	accepted. Changes	here will not affect the	e entity mailing address. If	more space is ne	eded, please add an attac	chment.
	Name		Business Address		City, State, Zip	
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