



Idaho Corporation Annual Report Form

File online at: SOSBIZ.idaho.gov

Due on/Before: 01/31/2018

Reporting Year: 2017

Date Formed: 01/07/1988

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

Attn: Annual Reports 450 North 4th Street Boise, ID 83702 Phone: (208) 334-2300

Formation Locale: ID

Annual Report: No filing for	ee if received by due date.
If reinstatement is required,	the reinstatement fee is $\$30.00$.

SOS Control Number: 266618 Filing Status: Inactive-Dissolved (Administrative)

☑ Reinstate Entity (\$30 fee)

Non-Profit Corporation (D)				
Name and	Mailing	Address:		

SANDPOINT AREA SENIORS, INC.

820 MAIN STREET SANDPOINT, ID 83864

(1) Add or	Change	Mailing	Address:
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(2) Change RA and/or RO Address:

Registered A	Agent (RA)	and Registered	Office (R	O) Address:
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NO AGENT

AGENT RESIGNED OR INVALID

BOISE, ID 83702 (ADA)

NANCY SAVAGE 820 MAIN Street Sandpoint, Idaho 83864

Note: The Registered Office address must be an Idaho address.

(3)	New	Regis	stered	Agent	(RA)	Signature	\cdot	B	k

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 **Business Address** henoa Pres. ; 1 O

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

Name	Business Address		City, State, Zip		L
Dorothy Kohne	(1	10	¿((/	
Bruce Wendle	1/	И	~ ((1_	ע
Loris Michael	ν,	, v	у.	ч	p
(5) Signature: Darotay f	Thong	(6) Date:	11 / 7-18		Law
7	1-1-1-45	(a) T(1)		1	Ō

(5) Signature:	Y	arolay	PEN	me

7) Type/Print Name: DOROThy	KOHNE	(8) Title: ROOM	marle
Instructions: Legibly complete the form shove	Englace a check made payable	to the Idaho Secretary of State for \$3) if reinstating

Sign and date this form and return to the address provided above.

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