



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 04/30/2021

Return completed form within 30 days

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street

Annual Report: No filing fee if received by the due date.					Boise, ID 83720 Phone: (208) 334-2300	
SOS Contro	ol Number: 219144	Filing Sta	Filing Status: Active-Good Standing			
Non-Profit Corporation (D)		Date For	med: 04/08/1982	2 Fo	ormation Locale: ID	21
Name and Mailing Address: TETON RIVER PROTECTIVE ASSOCIATION, INC. (1) Add or Change Mailing Address:						 1 1
4590 N SAL	EM RD	·				5
REXBURG,	, ID 83440-3261					AM
Registered WINSTON	Agent (RA) and Regist	ered Office (RO)	Address:	(2) Change F	RA and/or RO Address:	 ಸ ೯
4590 N SAL	-EM RD					ው
REXBURG,	, ID 83440					ived
	Note: The F	egistered Office addre	ess must be a phys	sical Idaho add	ress (no postal box).	۶
(3) New Re	gistered Agent (RA) Sig	nature:	agent is appointed in i	tem (2) above, th	e new agent must sign here to acce	
	ns. Enter names and business	addresses (with zip co	de) of the President	, Vice President	, Secretary, Treasurer.	
Title	Name		ess Address	<u> </u>	City, State, Zip	Ü
res	Winsten lars			Rel	Rexburg, Ld	8344/1
Sec.	Rodney Dollin	3 384	ON JAU) E.	wilford, to	8344 P
(5) Board of D	Directors names and business a	eddresses (with zip code	e). Attach additional	sheet if necess	ary.	
Name		Business Add	ress		City, State, Zip	
				 .		<i>₩</i>
						<u>Q</u>
						<u> </u>
						<u> </u>
	·) 7				44 -	awerence
(5) Signature:	Le unsion	- Large	<u>n</u>	(6) Date:	4-26-21	<u>.</u>
(7) Type/Print I	Name: Winston	harsen		(8) Title:	2:15 pm / Pr	esiden k
Instructions:	Legibly complete the form ab	ove. Sign and date this	form and return to t	he address prov	rided above.	idə.