



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 11/30/2020

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

Return completed form within 30 days to:

B0538-9560

11/06/2020, 9:35

Received

Denney

Idaho Secretary of State Attn: Annual Reports 450 North 4th Street Boise, ID 83720

Phone: (208) 334-2300

SOS Control Number: 182506

Filing Status: Active-Good Standing

Non-Profit Corporation (D)

Date Formed: 11/21/1977

Formation Locale: ID

Name and Mailing Address:

IDAHO PAINT HORSE CLUB, INC.

13157 S FIVE MILE RD KUNA, ID 83634-2663

(1) Add or Change Mailing Address:

Registered Agent (RA) and Registered Office (RO) Address:

KATHY MEZIN 13157 S FIVE MILE RD KUNA, ID 83634

(2) Change RA and/or RO Address:

Note: The Registered Office address must be a physical Idaho address (no postal box).

(3) New Registered Agent (RA) Signature:

If a new agent is appointed in item (2) above, the new agent must sign here to accept the appointment

Title	Name	Business Address	City, State, Zip
	Aimee Hall	17474 Van Slyke Rd.	Wilder, ID 83676
	Earlynn Chase	12317 Lone Star Rd.	Nampa, ID 83651
Secretary	Shawn Charters	PO Box 658	Middleton, ID 83644
reasurer	Kathy Mezin	13157 S. Five Mile Rd.	Kuna, ID 83634

Title	Name	Business Address	City, State, Zip
resident		17474 Van Slyke Rd.	Wilder, ID 83676
ice Pres	Earlynn Chase	12317 Lone Star Rd.	Nampa, ID 83651
ecretary	Shawn Charter	s PO Box 658	Middleton, ID 83644
reasurer	Kathy Mezin	13157 S. Five Mile	Rd. Kuna, ID 83634
(5) Board of Direc	ctors names and business add	dresses (with zip code). Attach additional sheet if n	necessary.
Name		Business Address	City, State, Zip
Megan Dulin		11342 W. Orchard Ave.	Nampa, ID 83651
Patricia Schuster		1784 W. Bayeux Dr.	Meridian, ID 83642
Wade Kirskey		6345 Thompson	Marsing, ID 83639
Trina Holton		7677 Remuda Dr.	Boise. ID 83709
Hono	orary		•
Nola Krahn PO		PO Box 86	Cascade, ID 83611
Butch Wonderlich 15		1530 Lawndale Dr.	Twin Falls, ID 83301

(7) Type/Print Name:

(8) Title:

Treasurer

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