



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 10/31/2020

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

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

SOS Control Number: 633045 Non-Profit Corporation (D) Name and Mailing Address: SHELTERSAFE, INC. 1905 1ST ST AVE S PAYETTE, ID 83661			Filing Status: Active-Good Standing Date Formed: 10/23/2017 Formation Locale: ID			
			(1) Add or Change Mailing Address:			11:16
						A
Registered DAVID REE 1905 ST AV PAYETTE, I	ES	stered Offic	e (RO) Address:	(2) Change RA	and/or RO Address:	Received
	Note: The	Registered Of	fice address must be a ph	ysical Idaho addres	s (no postał box).	λα
(3) New Reg	jistered Agent (RA) S	ignature:	If a new agent is appointed i	n item (2) above, the n	ew agent must sign here to accept the appo	intment.
(4) Corporation	s: Enter names and busine	ss addresses (v	with zip code) of the Preside	nt, Vice President, S	ecretary, Treasurer.	Z.
Title	Name		Business Address		City, State, Zip	
PRES.	GayeVise	lover	1905 PHVES	0	tevette 10836	
Vice PRE	S DAVID KEL	D	1905/31 Ave	· Do.	Fryelle LD 836	<i>61</i>
SecTRI	5 Marion Vi)elover	1905 131AVE	e. <i>20,</i>	184 EVI 21836	
(5) Board of Di	rectors names and business	s addresses (wi	ith zip code). Attach addition	nal sheet if necessary	<u> </u>	
Name			ess Address		City, State, Zip	O H
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(5) Signature:	Marion 1	/.Se	love	(6) Date:	1-2-2020	
(7) Type/Print N	lame: MARION	V. 50	ZLOVER	(8) Title: 5	ec. TREASURE	R O
Instructions:	Legibly complete the form a	above. Sign and	d date this form and return t	o the address provide	ed above.) Dec