



## **Idaho Corporation Annual Report Form**

File online at: sos.idaho.gov

Due no later than: 02/28/2020

## Return completed form within 30 days to:

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

Annual Report: No filing fee if received by the due date.			Phone: (208) 334-2300	
SOS Control Number: 192750			Filing Status: Active-Good Standing	
General Business Corporation (D)		Date Formed: 02/26/1979	Formation Locale: ID	6
Name and Mailing Address:		(1) /	(1) Add or Change Mailing Address:	
CIRCLE FIVE, INC. 2130 RIPON AVE				1
	D 83501-6158			0
2277101011,	.5 00001 0100			ή •
Registered A	gent (RA) and Registe	red Office (RO) Address:	Change RA and/or RO Address:	<del>-</del>
WANDA J CC	OOK	(2)	mange for and/or fice Address.	(
2130 RIPON AVE				+
LEWISTON, I	D 83501			9
	Note: The Re	gistered Office address must be a physical Id	aho address (no postal box).	K
(2) Now Dogi				Ė
(3) New Regis	stered Agent (RA) Sigr		<ul> <li>whove, the new agent must sign here to accept the appointment</li> </ul>	ent
(4) Corporations:	Enter names and business a	addresses (with zip code) of the President, Vice F	resident, Secretary, Treasurer.	<del>5 -</del> 1
Title	Name	Business Address	City, State, Zip	<del></del>
Pres.	JOE Cook Ju	2 1130 RIDON DUP	Lewiston Fora 8350	0/
DICE Presi	Joe Cook SR.	2130 RIDON QUE	Lewiston Ida 8350	
sec.	Wonda 5 Coo	k 1130 Ripon Que	Lewiston I da 835	0/ 4
(5) Board of Dire	ectors names and business ad	dresses (with zip code). Attach additional sheet i	f necessary.	- (
Name		Business Address	City, State, Zip	3
				- 5
<del></del>				
		-		<u>[</u>
	<del></del>			
				-
		2		
(5) Signature: 1	Souda J. Con	<u>(6) C</u>	ate: 1-19-10	(
(7) Type/Print Na	me: Wanda J		itle: 5 e c,	
Instructions: 1	anilah, annulah tha fara -t-			
instructions: L	egibly complete the form abov	ve. Sign and date this form and return to the add	ess provided above.	=