

## **Idaho Corporation Annual Report Form**

File online at: sosbiz.idaho.gov

## Return completed form within 30 days to:

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

Phone: (208) 334-2300

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

For Office Use Only

-FILED-

File #: 0005447126

Date Filed: 10/23/2023 10:55:00 AM

Due no later than: 09/30/202

SOS Contro	ol Number: 492/608	Filing Status: Active-G	Filing Status: Active-Good Standing		
Non-Profit Corporation (D)		Date Formed: 09/28/20	)22 Form	mation Locale: ID	
	Mailing Address: EK FAMILY CAMP AN WAY 8	ID RETREAT, INC.	(1) Add or Chan	ge Mailing Address:	
DEARY, ID	83823				
•					
Registered Agent (RA) and Registered Office (RO) Address: ANDRE K MOLSEE			(2) Change RA and/or RO Address:		
5276 HIGH					
DEARY, ID	83823				
	No.	- Designational Office address worth to a war			
	, Note: In	e Registered Office address must be a p	nysical idano addres:	s (no postal box).	
(3) New Re	gistered Agent (RA) \$				
		If a new agent is appointed	in item (2) above, the ne	w agent must sign here to accept the appointme	
(4) Corporatio	ns: Enter names and busine	ess addresses (with zip code) of the Presid	ent, Vice President, Se	cretary, Treasurer.	
Title	Name	Business Address		City, State, Zip	
Pres.	Ancre Mo	see 5276 Hus 8		Deary ID 83823	
Vice Pr	es Amon Mols	CP 498177D8 EIK 6	iver 83817	ElkRiver. ID 83827	
Sec	Jarob Donia	an 138/ NAvon Pd. D.	2011D83813	Peare ID 83823	
Treasure	- Andre Walse	e 5276 Hwy 8		Deary ID 83823	
(5) Board of D	irectors names and busines	s addresses (with zip code). Attach addition	onal sheet if necessary.	,,,	
Name		Business Address		City, State, Zip	
		, ]			
(5) Signature:	Chale 1)	Talaer	(6) Date: / 6	13/13	
(7) Type/Print I	Name: Andre	Malcoe	(8) Title: Pr	e.s .	

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