



Idaho Corporation Annual Report Form

File online at: sosbiz.idaho.gov

Due no later than: 06/30/2020

Return completed form within 30 days to: 37

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

Ann	nual Report: No filing fe	e if receiv	ved by the due date.		450 North 4th Street Boise, ID 83720 Phone: (208) 334-2300	01 /0	
SOS Control Number: 125177			Filing Status: Active-Good Standing				
Non-Profit Corporation (D)		ſ	Date Formed: 06/27/196	66	Formation Locale: ID	6	
Name and Mailing Address: PACK SADDLE WATER CORPORATION 3566 N 8000 W			(1) Add or Change Mailing Address:		. V . D .		
TETONIA, I	D 83452-5038					È	
Registered TERRELL F 890 W 400 I TETONIA, II	N	ered Offic	ce (RO) Address:	(2) Ch	ange RA and/or RO Address:	7 CC	
	gistered Agent (RA) Sig	nature:_	 	n item (2) ab	ove, the new agent must sign here to accept the ap	opointment.	
Title	Name	Enter names and business addresses (with zip code) of the Preside Name Business Address			City, State, Zip		
Dres	Barry Jardine 3		3566N 800	00 11/	Totania) Id 8	3452	
Sec	TerrellF7	AL	890 W 400	o N	Tetonia Fal 8:	3452	
(5) Board of D	irectors names and business a	ddresses (w	ith zip code). Attach addition	al sheet if r	necessary.	C	
Name Bo		Busin	siness Address		City, State, Zip	City, State, Zip	
						, and the same of	
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(5) Signature;	Larry	Ja	rdine	(6) Da	te: May 15 - 20	20	
(7) Type/Print N	Name: Garry	Jaro	line_	(8) Titl			

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