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Annual Report 2019

NORTH FORK LANDOWNERS' ASSOCIATION (D024459)

Annual Report Year 2019

Handling Option Standard Processing

Corporate Type Public Benefit Corporation with members

State of Incorporation Montana

Registered Agent in Montana

Name Christine M Heitz

Street Address 15645 N Fork Rd, Polebridge, Montana, 59928,

United States

Mailing Address PO Box 1603, Columbia Falls, Montana, 59912,

United States

Registered Agent Type Non-Commercial

Business Mailing Address of Principal Office

Postal Address PO Box 1603, Columbia Falls, Montana, 59912,

United States

Purpose PROMOTIONAL-GENERAL

Directors/Officers

Name Christine M Heitz

Status Active

Business Mailing Address 15645 N Fork Rd, Polebridge, Montana, 59928,

United States

Position Treasurer

Name Irvin Heitz

Status Active

Business Mailing Address 15645 N Fork Rd, Polebridge, Montana, 59928,

United States

Position Director

Name Dawn Jacobson

Status Active

Business Mailing Address 225 Texas Ave, Whitefish, Montana, 59937,

United States

Position Secretary

Name RANDY KENYON

Status Active

Business Mailing Address PO BOX 3312, KALISPELL, Montana, 59903,

United States

Position Other Officer

Name Lynn Ogle

Status Pending

Business Mailing Address 296 Kintla Ranch Rd, Polebridge, Montana,

59928, United States

Position Director

Name Rachel Peura

Status Pending

Business Mailing Address 720 Deep Woods Trail, Polebridge, Montana,

59928, United States

Position Vice-president

Name Kevin Ulrichsen

Status Pending

Business Mailing Address 711 Moose Creek Rd, Polebridge, Montana,

59928, United States

Position Director

Name Bill Walker Status Pending

Business Mailing Address 11233 N Fork Rd, Polebridge, Montana, 59928,

United States

Position Director

Name Larry Wilson

Status Pending

Business Mailing Address PO Box 3, Columbia Falls, Montana, 59912,

United States

Position President

Signature

I have been authorized by the business entity to file this document online.

Yes

I, HEREBY SWEAR AND/OR AFFIRM, under penalty of law, including criminal prosecution, that the facts contained in this document are true. I certify that I am signing this document as the person(s) whose signature is required, or as an agent of the person(s) whose signature is required, who has authorized me to place his/her signature on this document.

Yes

Name Treasurer North Fork Landowners Assn

Position Authorized Agent

Date 01/25/2019

Daytime Contact

Phone 406-626 3583

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Email