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|--|--|--|--|-------------------------|
| <b>No. 84354</b>   | <b>Idaho Corporation Annual Report Form</b><br>Due No Later Than November 1, 1994  |  | 2. Registered Agent and Office <b>NOT A P.O. BOX</b><br><br>RAMONA ALLEN<br>1719 EAST 3400 SOUTH<br><br>WENDELL ID 83355 |                         |
| Return To<br><br><b>Secretary of State</b><br><b>Room 203, Statehouse</b><br><b>Boise, ID 83720</b><br><br>* FIRST NOTICE *<br>NO FEE REQUIRED | 1. Mailing Address:<br>WENDELL COMMUNITY ARTS COUNCIL,<br>RAMONA ALLEN<br>P. O. BOX 164<br>WENDELL ID 83355<br><i>See Attached</i> |  | 3. Incorporated Under The Laws<br>of ID<br>NO: 84354   |                         |
| <b>4. Names and Addresses of Officers and Directors MUST BE PRINTED OR TYPED</b>   |  |  |  |                         |
|  | <u>Name</u>  | <u>Street or P.O. Address</u>  | <u>City</u>  | <u>State</u> <u>Zip</u> |
| President:   | Ramona Allen   | 17 19 E 3400 S   | Wendell  | ID 83355                |
| Secretary:   | Linda Hilles   | 3356 S 1800 E  | Wendell  | ID 83355                |
| Directors:   | Ernie Sites  |  |  |                         |
|  | Edna Hoagland  |  |  |                         |
|  | Ella Jean Osborn   |  |  |                         |
|  | Nan Reedy  |  |  |                         |
| 5. Nature of Business<br><br>Com Arts Council  |  | 6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete.<br>Signature <u>Ramona Allen</u> <i>Ramona Allen</i> Date <u>1/18/94</u><br>Name (Typed or Printed) _____ Title <u>President</u> |  |                         |

# NEW ADDRESS VERIFICATION CARD

Check yellow forwarding labels on your mail when you arrive at your new address. If your name or new address information on the label is incorrect, please send the following information to your Postmaster at the City/State/ZIP Code of your former address. Please print or type clearly.

YOUR NAME \_\_\_\_\_

ADDRESS OF YOUR FORMER RESIDENCE:

Apt./Suite/P.O. Box/R.D. No.: \_\_\_\_\_

No. and Street \_\_\_\_\_

City, State, ZIP + 4 Code \_\_\_\_\_

INFORMATION SHOWN ON FORWARDING LABEL:

Your Name \_\_\_\_\_

Apt./Suite/P.O. Box/R.D. No.: \_\_\_\_\_

No. and Street \_\_\_\_\_

City, State, ZIP + 4 Code \_\_\_\_\_

CORRECT NEW ADDRESS:

Your Name \_\_\_\_\_

Apt./Suite/P.O. Box/R.D. No.: \_\_\_\_\_

No. and Street \_\_\_\_\_

City, State, ZIP + 4 Code \_\_\_\_\_

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PS Form 3576-A, April 1999

Signature & title of person authorizing address change. (DO NOT print or type)

☆ USGPO 1990-273-082

Fold and Tear on Dotted Line Before Mailing