



## **Idaho Corporation Reinstatement Form**

File online at: sosbiz.idaho.gov

## Return completed form to Completed form to Complete form

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

	Reinstatem	ent fee: \$30.00.	Boise, ID 83720 Phone: (208) 334-2300	716/
SOS Control Number: 551476		Filing Status: Inactive-D	issolved (Administrative)	Ž 2
Non-Profit Corporation (D)		Date Formed: 03/16/200	9 Formation Locale: ID	21
BAKER YE 4409 W HI	Mailing Address: EOMANS FOUNDATION LLCREST DR 83705-2862	FOR THE ARTS, INC.	(1) Add or Change Mailing Address:	3:10 PM
JANE Y BA 4409 W HII BOISE, ID	AKER LLCREST DR 83705		(2) Change RA and/or RO Address: sical Idaho address (no postal box).	Received by ID
(4) Corporation	ons: Enter names and business	addresses (with zip code) of the President	, Vice President, Secretary, Treasurer.	<del>72</del>
Title	Name	Business Address	City, State, Zip	- 6
				<u> </u>
				<u> </u>
(5) Board of [	I Directors names and business a	ddress (with zip code). Attach additional si	heet if necessary.	
Name		Business Address	City, State, Zip	Hh
Deno	is Samer	10101 W. Laviat	Dr Boise TO 8	<u>7714</u> #
Juci	i Samer	16101 11/2 Lario	at Dr Boise ID 8	
Jen	afer baler bil	Hillen 10 Woodlan	id Rd Narwalk CT.	D
Jeffe	y Licus Baker	- 1409 W. Hilley est D	L. Boise, ID 8970	<u>۲</u>
Jane	Y. Baker	4409 W Hilleres	+DV. BCISE ID 89	765
John	E Baker	4409 W. Hilleires	it De Boise ID 837	
				75
				9
(5) Signature:	Janu 18B	afeer	(6) Date: 9-16-21	De
(7) Type/Print	Name: JOHA Y	Baker	(6) Date: $9-16-21$ (8) Title: $PA$ Director	nne