| No. C 144809 | Reinstatement Annual Report Form ADMIN DISSOLVED 10/11/2013 2. Registered Agent and Office (NOT A P.O. BOX) | (NOT A P.O. BOX) |
|---|--|--|
| Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 | 1. Mailing Address: Correct in this box if needed. ECLIPSE FOUNDATION, INC. 1353 S GOSLING PL EAGLE ID 83616 | LIANNE HUNT 1353 S GOSLING PL EAGLE ID 83616 |
| reinstatement fee due: \$30.00 | | 3. <u>New</u> Registered Agent Signature. |
| 4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. Office Held Name Street or PO Address City State Country Postal Code Board Member Li Auug Hunt 13 Goi W McMilland 130.5e IO ADA 03713 Board Member Ryan Hunt 13601 W. McMillauR1 Sucket 102-115 TSoide ID ADA 93713 Suite 102-115 TSoide ID ADA 93713 | | |
| | | |
| 5. Organized Under the Law IDAHO C 144809 | Name (type or print): | S/14/16 Title: Board Member |
| Issued 05/14/2016 by online | | |

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

ALLES Enter Day consciol attention to the mailing address. If the severet