

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002393

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: JOE MORTEN & SON, INC.

**Current Principal Place of Business:**

1100 WEST 29TH STREET  
SOUTH SIOUX CITY, NE 68776

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 277  
SOUTH SIOUX CITY, NE 68776

**New Mailing Address:**

FEI Number: 47-0638072      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AIDIF, DANIEL R  
501 EAST SOUTH STREET, SUITE A  
ORLANDO, FL 328021935 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: ERLANDSON, DAVID J  
Address: 1100 WEST 29TH STREET  
City-St-Zip: SOUTH SIOUX CITY, NE 68776

Title: V ( ) Delete  
Name: EIDE, RANDALL J  
Address: 1100 WEST 29TH STREET  
City-St-Zip: SOUTH SIOUX CITY, NE 68776

Title: S ( ) Delete  
Name: COOK, DEBORAH J  
Address: 1100 WEST 29TH STREET  
City-St-Zip: SOUTH SIOUX CITY, NE 68776

Title: TD ( ) Delete  
Name: TENHULZEN, GAYLEN L  
Address: 1100 WEST 29TH STREET  
City-St-Zip: SOUTH SIOUX CITY, NE 68776

Title: COBD ( ) Delete  
Name: FUGLEBERG, HUGH H  
Address: 1100 WEST 29TH STREET  
City-St-Zip: SOUTH SIOUX CITY, NE 68776

Title: D ( ) Delete  
Name: RAGER, R. SCOTT  
Address: 1100 WEST 29TH STREET  
City-St-Zip: SOUTH SIOUX CITY, NE 68776

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: AS (X) Change ( ) Addition  
Name: POSSON, CRAIG A  
Address: 1100 WEST 29TH STREET  
City-St-Zip: SOUTH SIOUX CITY, NE 68776

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG A. POSSON

AS

04/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date