

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002903

FILED
Jul 02, 2007
Secretary of State

Entity Name: PRAIRIELAND BANCORP., INC.

Current Principal Place of Business:

484 EAST MAIN STREET
BUSHNELL, IL 61422

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 149
BUSHNELL, IL 61422

New Mailing Address:

FEI Number: 37-1098758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIALEK, JOSHUA M ESQ.
5801 PELICAN BAY BLVD., SUITE 300
NAPLE, FL 34108 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: STEELMAN, MICHAEL G
Address: 484 EAST MAIN STREET
City-St-Zip: MUSHNELL, IL 61422

Title: VD () Delete
Name: HOLLAND, STEPHEN
Address: 495 W. OSBORN STREET
City-St-Zip: BUSHNELL, IL 61422

Title: SD () Delete
Name: CORTELYOU, DANIEL P
Address: 484 E. MAIN STREET
City-St-Zip: BUSHNELL, IL 61422

Title: D () Delete
Name: RAUCHERT, CYNTHIA
Address: 8 HILLCREST DRIVE
City-St-Zip: BUSHNELL, IL 61422

Title: D () Delete
Name: MORROW, TERRY
Address: 8 RED CLOVER CORUT
City-St-Zip: ST. CHARLES, MO 63303

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:

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: MICHAEL G. STEELMAN

PCD

07/02/2007

Electronic Signature of Signing Officer or Director

_____ Date