## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000003331

Entity Name: JOHN DEERE RISK PROTECTION, INC.

FILED Apr 21, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	86TH STREE <sup>-</sup> N, IA 5013166					
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. BOX 6 JOHNSON	6600 , IA 50131660	0				
FEI Number:	36-4459599	FEI Number Applied For ( ) FEI N	lumber Not App	Olicable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
1200 SOUT	ORATION SYS FH PINE ISLAN ON, FL 33324	ID ROAD				
The above in the State		ubmits this statement for the purpose	e of changing i	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Agent		Date		
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title:	DAGGETT, DEN 6400 N.W. 86TH JOHNSTON, IA	STREET	Title: Name: Address: City-St-Zip: Title:	( ) Change ( ) Addition  SV (X) Change ( ) Addition		
Name: Address: City-St-Zip:	HESEMAN, JAW 6400 N.W. 86TH JOHNSTON, IA	ES R I STREET	Name: Address: City-St-Zip:	HESEMAN, JAMES R 6400 N.W. 86TH STREET JOHNSTON, IA 501316600		
Title: Name: Address: City-St-Zip:	V () HAIGHT, TIMOT 6400 N.W. 86TH JOHNSTON, IA	STREET	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition HAIGHT, TIMOTHY V 6400 N.W. 86TH STREET JOHNSTON, IA 501316600		
Title: Name: Address: City-St-Zip:	V () ALLEN, SAMUE ONE JOHN DEE MOLINE, IL 612	RE PLACE	Title: Name: Address: City-St-Zip:	AS (X) Change ( ) Addition JARRETT, THOMAS K ONE JOHN DEERE PLACE MOLINE, IL 61265		
Title: Name: Address: City-St-Zip:	VT () MACK, MICHAE ONE JOHN DEE MOLINE, IL 612	RE PLACE	Title: Name: Address: City-St-Zip:	VT (X) Change ( ) Addition MACK, MICHAEL J JR. ONE JOHN DEERE PLACE MOLINE, IL 612655209		
Title: Name: Address: City-St-Zip:	V () DAHL, CHARLE 6400 N.W. 86TH JOHNSTON, IA	STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS K. JARRETT AS 04/21/2006