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FILED

Mar 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P22783

(5)

1. Corporation Name

GRAIN PROCESSING CORPORATION

Principal Place of Business

1800 OREGON STREET  
MUSCATINE IA 52761-7349

Mailing Address

1800 OREGON STREET  
MUSCATINE IA 52761-1404

3. Date Incorporated or Qualified

01/30/1989

3a. Date of Last Report

03/26/1996

4. FEI Number

42-1321075

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P. O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

William B. Trent, Jr.

2/27/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD  
NAME KAUTZ, J.T.  
STREET ADDRESS 2357 200 ST  
CITY-ST-ZIP MUSCATINE IA

DELETE

TITLE PD  
NAME KENT, G.A.  
STREET ADDRESS 2010 MULBERRY AVE.  
CITY-ST-ZIP MUSCATINE IA

DELETE

TITLE VS  
NAME TRENT, W.B.  
STREET ADDRESS 312 EAGLE RIDGE RD.  
CITY-ST-ZIP MUSCATINE IA

DELETE

TITLE VD  
NAME HAYDEN, C. A  
STREET ADDRESS 710 SUNRISE CIR  
CITY-ST-ZIP MUSCATINE IA

DELETE

TITLE VD  
NAME CROWDER, J. C.  
STREET ADDRESS 1804 HAMMANN DR.  
CITY-ST-ZIP MUSCATINE IA

DELETE

TITLE VD  
NAME SHIELDS, L.P.  
STREET ADDRESS 403 W. SECOND STREET  
CITY-ST-ZIP MUSCATINE IA

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William B. Trent, Jr. SECRETARY 2/27/97 319-264-4719

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)