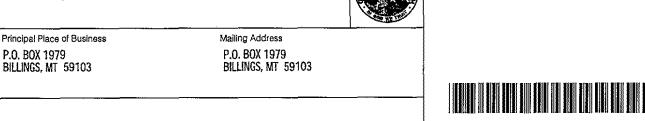
2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P40501 1. Entity Name WYO-BEN, INC. Principal Place of Business Mailing Address

FILED Apr 27, 2006 08:00 AN Secretary of State

CR2E034 (11/05)

Fee Required



DO NOT WRITE IN THIS SPACE

4. FEI Number	-	Applied For	
81-0291876		Not Applicable	
5. Certificate of Status Desired	П	\$8.75 Additional	

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

04242006

SIGNATURE							
	Signature, typed or printed name of registered agent and title	if applicable (NOTE, Registere	d Agent signature	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees	U00000541132 05/10/06-80046-013 150.00		
10.	OFFICERS AND DIREC	CTORS	I				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, DAVID S. 4732 SANCTUARY TRAIL BILLINGS, MT						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD BROWN, ROCKWOOD 3028 JOAN LANE BILLINGS, MT						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BUCKINGHAM DOUGLAS A 531 INDIAN TRAIL BILLINGS, MT			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD BROWN, RICHARD K. 1011 YALE BILLINGS, MT			IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with a dodress, with all pring like empowered.							

IGNING OFFICER OR DIRECTOR

DOUGLAS A. BUCKINGHAM

3. 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. I am familiar with, and accept