2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F1000003346

Entity Name: NFO MEMBERS LIVESTOCK, INC.

Current Principal Place of Business:

528 BILLY SUNDAY RD., SUITE 100 AMES, IA 50010

Current Mailing Address:

P. O. BOX 2508 AMES, IA 50010

FEI Number: 42-1464783

Name and Address of Current Registered Agent:

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

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	Р	Title	V
Name	OLSON, PAUL	Name	RINIKER, PAUL
Address	W15776 W. JACKSON	Address	406 N. CHURCH, PO BOX 91
City-State-Zip:	TAYLOR WI 54659	City-State-Zip:	GREELEY IA 52050
Title	S	Title	т
Name	REED, DAVE	Name	MILLER, MICHAEL
Address	2230 10TH STREET	Address	1005 NORWOOD CT.
City-State-Zip:	NEVADA IA 50201	City-State-Zip:	NORWALK IA 50211
Title	D	Title	D
Name	BAKKEN, RHONDA	Name	CASLER, DANIEL
Name Address	BAKKEN, RHONDA 2444 MADISON RD.	Name Address	130 STARING LANE
Address City-State-Zip:	2444 MADISON RD. DECORAH IA	Address City-State-Zip:	130 STARING LANE LITTLE FALLS NY 13365
Address	2444 MADISON RD.	Address	130 STARING LANE
Address City-State-Zip:	2444 MADISON RD. DECORAH IA	Address City-State-Zip:	130 STARING LANE LITTLE FALLS NY 13365
Address City-State-Zip: Title	2444 MADISON RD. DECORAH IA DIRECTOR	Address City-State-Zip: Title	130 STARING LANE LITTLE FALLS NY 13365 DIRECTOR
Address City-State-Zip: Title Name	2444 MADISON RD. DECORAH IA DIRECTOR COEHOORN, DARLEN	Address City-State-Zip: Title Name	130 STARING LANE LITTLE FALLS NY 13365 DIRECTOR CROSBY, TOM

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I hereby 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 all other like empowered.

SIGNATURE: DAVE REED

SECRETARY

04/06/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	ENDRES, FRANK	Name	FORDER, WAYNE
Address	2805 BUTTE MOUNTAIN ROAD	Address	5728 SHEPHERD BUTTE ROAD
City-State-Zip:	CORNING CA 96021	City-State-Zip:	HIGHWOOD MT 59450
Title	DIRECTOR	Title	DIRECTOR
Name	HEISS, ALVA	Name	JARDING, JOE
Address	717 STONEY RUN ROAD	Address	9319 FARLEY ROAD
City-State-Zip:	BEVERLY OH 45715	City-State-Zip:	FARLEY IA 52046
Title	DIRECTOR	Title	DIRECTOR
Name	KLEAVING, GILBERT	Name	LAMPERT, PATRICK
Address	4195 ADLER ROAD	Address	15 EASTMOOR COURT
City-State-Zip:	TELL CITY IN 47586	City-State-Zip:	NEW BREMEN OH 45869