

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005456

Entity Name: HO-CHUNK, INC.**Current Principal Place of Business:**1 MISSION DRIVE
WINNEBAGO, NE 68071**Current Mailing Address:**PO BOX 390
WINNEBAGO, NE 68071 US**FEI Number:** 47-0784077**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title	C
Name	MALLORY, KENNY
Address	1 MISSION DRIVE
City-State-Zip:	WINNEBAGO NE 68071

Title	VC
Name	MEDINA, PAT
Address	1 MISSION DRIVE
City-State-Zip:	WINNEBAGO NE 68071

Title	D
Name	BUCHANAN, LAUREN
Address	1 MISSION DRIVE
City-State-Zip:	WINNEBAGO NE 68071

Title	D
Name	SNOW, THOMAS
Address	1 MISSION DRIVE
City-State-Zip:	WINNEBAGO NE 68071

Title	P
Name	MORGAN, LANCE
Address	1 MISSION DRIVE
City-State-Zip:	WINNEBAGO NE 68071

Title	VP
Name	HAMILTON, ANNETTE
Address	1 MISSION DRIVE
City-State-Zip:	WINNEBAGO NE 68071

Title	DIRECTOR
Name	WARNER, ROLAND
Address	1 MISSION DRIVE
City-State-Zip:	WINNEBAGO NE 68071

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: LANCE MORGAN**PRESIDENT****06/13/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date