

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P40501

**Entity Name:** WYO-BEN, INC.

**Current Principal Place of Business:**

1345 DISCOVERY DRIVE  
BILLINGS, MT 59102

**Current Mailing Address:**

PO BOX 80687  
BILLINGS, MT 59108-0687 US

**FEI Number:** 81-0291876

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            PRESIDENT; DIRECTOR  
Name            BROWN, DAVID S.  
Address        1345 DISCOVERY DRIVE  
City-State-Zip: BILLINGS MT 59102

Title            CHAIRMAN; DIRECTOR  
Name            BROWN, ROCKWOOD  
Address        1345 DISCOVERY DRIVE  
City-State-Zip: BILLINGS MT 59102

Title            VP- RESOURCES; SECRETARY  
Name            BROWN, RICHARD K  
Address        1345 DISCOVERY DRIVE  
City-State-Zip: BILLINGS MT 59102

Title            VP- SALES  
Name            WORNOM, JOHN  
Address        1345 DISCOVERY DRIVE  
City-State-Zip: BILLINGS MT 59102

Title            DIRECTOR  
Name            BIXBY, BRADLEY  
Address        1345 DISCOVERY DRIVE  
City-State-Zip: BILLINGS MT 59102

Title            VP-FINANCE; TREASURY  
Name            HAVLIN, JOSEPH  
Address        1345 DISCOVERY DRIVE  
City-State-Zip: BILLINGS MT 59102

Title            DIRECTOR  
Name            LES, GARY  
Address        102 N WATER STREET  
                  STE #407  
City-State-Zip: MILWAUKEE WI 53202

Title            DIRECTOR  
Name            SCHOCH, JR. , JOHN  
Address        1620 GROMMON RD.  
City-State-Zip: NAPERVILLE IL 60564

**Continues on page 2**

*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:** TEE AUNE

**TAX MANAGER**

**02/02/2022**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           GILICINSKI, ANDREW  
Address        N43W23289 BEAVER CT.  
City-State-Zip: PEWAUKEE WI 53072

Title           DIRECTOR  
Name           BROWN, KENT  
Address        1407 LANIER PL NE  
City-State-Zip: ATLANTA GA 30306