FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 04 1998 8:00am Secretary of State

	1998	DIVISION OF	CORPORATIONS	7	
	MENT # 819084 COMPANY, INC.	4 (5)			AN 1911 1184 1184 1184 1184
B 1 1 1 1 B					. JI I BIBN BIBN BIBN BIBN 1864
Principal Plac		Mailing Address			
400 LOCUST SUITE 300	SHREET	400 LOCUST STREET SUITE 300			
DES MOINES	IA 50309	DES MOINES IA 50309		DO NOT WRITE IN TH	S SPACE
				3. Date Incorporated or Qualified 10/13/1965	
-	flace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# elc	Suite, Apt. #, etc.		42-0591030	Not Applicable \$8.75 Additional
22	#, 61 0.	27		5. Certificate of Status Desired	Fee Regulred
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	8. This corporation owes or has paid the	
24	25	<u>]29</u>]	30	Personal Property Tax due June 30.	Yes No
· ^	9. Name and Address of Currer	it Hegistered Agent	81 Name	10. Name and Address of New Registers	o Agent
U	CORPORATION SYSTEM				
1200 S. PINE ISLAND ROAD PLANTATION FL 33324			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
, ,,,	41111011 1 E 00024		83		
			-		
			84 City	F	L 85 Zip Code
agent. I a	im familiar with, and accept the oblig		lorida Statutes. [E: Registered Agent signature required]	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	
12.		D DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PCEO	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	DESTIGTER, GLENN H.		1.2 NAME		
STREET ADDRESS	813 SW COHASSET DR		1.3 STREET ADDRESS	3209 NE TRILLIA	
CITY-ST-ZIP	ANKENY IA		1.4 CITY-ST-ZIP		
TITLE	EVP	DELETE	2.1 TITLE		Change Addition
NAME	Gosselink, Jerry D 1575 NW 75TH ST		2.2 NAME		
STREET ADDRESS CITY-ST-ZIP	DES MOINES IA		2.3 STREET ADDRESS 2.4 City-St-Zip		
TITLE	P	DELETE	3.1 TITLE		Change Addition
NAME	KEOPNICK, JIMMY R.	_ -	3.2 NAME		
STREET ADDRESS	2640 HOPE LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE PARK FL		3 4. CITY-ST-ZIP		
TITLE	P	☐ DEL E TE	4.1 TITLE	· -	☐ Change ☐ Addition
NAME	MOHR, LARRY D.		4. 2 NAME		
STREET ADORESS	1830 SOUTH ROGERS MESA AZ		4.3 STREET ADDRESS		
C+TY-ST-ZIP TITLE	VP	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	<u> </u>	Change Addition
NAME	HORNADAY, WILLIAM R.		5.2 NAME		- vineige - roution
STREET ADDRESS	5933 E. CALLE DEL SUD		5.3 STREET ADDRESS		
CITY-ST-ZIP	PHOENIX AZ		5.4 CITY - ST - ZIP		
TITLE	VP	DELETE	6.1 TITLE		Change Addition
NAME	SNOOK, FRANCIS E.		6.2 NAME		
STREET ADDRESS	1148 24TH ST		6.3 STREET ADDRESS		ļ
CITY-ST-ZIP	WEST DES MOINES IA	ith this filips does and apply to	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further	portify that the information
indicated officer or (on this annual report or supplementa	al annual report is true and acceiver or trustee empowered to	curate and that my signatur	Section 119.07(3)(i), Florida Statutes. I further re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and the	under oath; that I am an