2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004611

Entity Name: SEMCO DISTRIBUTING, INC.

FILED Apr 05, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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50 ROBINSON INDUSTRIAL DRIVE PERRYVILLE, MO 63775

Current Mailing Address: New Mailing Address:

50 ROBINSON INDUSTRIAL DRIVE PO BOX 385 PERRYVILLE, MO 63775 PERRYVILLE, MO 63775

FEI Number: 43-1445286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

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

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:

Address:

City-St-Zip:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

230 HWY N

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD () Delete Title: (X) Change () Addition ROBINSON, EDWARD J ROBINSON, EDWARD J Name: Name:

230 HWY N. 4366 HIGHWAY T Address: Address: City-St-Zip: PERRYVILLE, MO 63775 City-St-Zip: PERRYVILLE, MO 63775

Title: Title: () Delete (X) Change () Addition Name:

GADBERRY, RONNIE L Name: GUILLIAMS, DONALD J 898 PCR 926 205 EDWARDS STREET Address: Address: ST. MARY, MO 63673 PERRYVILLE, MO 63775 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete S/D

ROBINSON, KEITH E ROBINSON, KATHLEEN M Name: Name: 3770 HWY T 4366 HIGHWAY T Address: Address:

City-St-Zip: PERRYVILLE, MO 63775 City-St-Zip: PERRYVILLE, MO 63775

Title: (X) Delete Title: () Change () Addition Name:

ROBINSON, KATHLEEN M Name: Address: PERRYVILLE, MO 63775 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWARD J. ROBINSON **PCD** 04/05/2005