

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001786

FILED  
Mar 28, 2006  
Secretary of State

Entity Name: BORDER STATES MANAGEMENT, INC.

## Current Principal Place of Business:

1308 E 60TH STREET N  
SIOUX FALLS, SD 57104

## New Principal Place of Business:

## Current Mailing Address:

1708 SOUTH 1ST STREET  
WILLMAR, MN 56201

## New Mailing Address:

FEI Number: 46-0432839

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PLATTE, DAVID E  
603 INDIAN ROCKS RD.  
BELLEAIR, FL 33756 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: CODY, JOE  
Address: 1629 S CLEVELAND AVE #C  
City-St-Zip: SIOUX FALLS, SD 57103

Title: VCVP ( ) Delete  
Name: WALZ, MIKE  
Address: 3045 WEST DONAHUE DRIVE  
City-St-Zip: SIOUX FALLS, SD 57105

Title: DST ( ) Delete  
Name: KRAGH, RANDY  
Address: 1920 MEADOWROSE BLVD.  
City-St-Zip: ST CLOUD, MN 56301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOE CODY

PRES

03/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date