2006 FOR PROFIT CORPORATION ANNUAL REPORT

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Feb 16, 2006 8:00 am
Secretary of State
02-16-2006 90041 004 ***150.00

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1. Entity Name
BERTHEL FISHER & COMPANY FINANCIAL SERVICES, INC.

Principal Place of Business	Mailing Address
701 TAMA STREET MARION, IA 52302	PO BOX 609 MARION, IA 52302

00010773

01302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1029773
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	BERTHEL, THOMAS
STREET ADDRESS	701 TAMA STREET
CITY-ST-ZIP	MARION, IA 52302
TITLE	VC
NAME	FISHER, FRED P
STREET ADDRESS	3101 BROADWAY STE. 230
CITY-ST-ZIP	KANSAS CITY, MO 64111
TITLE	DP
NAME	WHEELAN, DWIGHT E
STREET ADDRESS	701 TAMA STREET
CITY-ST-ZIP	MARION, IA 52302
TITLE	DT
NAME	BRENDENGEN, RONALD
STREET ADDRESS	701 TAMA STREET
CITY-ST-ZIP	MARION, IA 52302
TITLE	VP
NAME	WEGMAN, DANIEL P
STREET ADDRESS	701 TAMA STREET
CITY-ST-ZIP	MARION, IA 52302
TITLE	S
NAME	SMITH, LESLIE D
STREET ADDRESS	701 TAMA STREET
CITY-ST-ZIP	MARION, IA 52302

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Daniel R. Wegman VP/Controller 3/30/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #