2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006
Secretary of State

DOCUMENT# F05000007270

Entity Name: SCOTCHMAN INDUSTRIES, INC.

Current Principal Place of Business:

180 E. HWY. 14
PHILIP, SD 57567

New Principal Place of Business:

Current Mailing Address:

PO BOX 850
PHILIP, SD 57567

New Mailing Address:

FEI Number: 46-0305595 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLETTE, DONALD
17611 EAST ST.
NORTH FT. MYERS, FL 33917 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: P ( ) Delete
Name: KROETCH, JERRY
Address: BX 122
City-St-Zip: PHILIP, SD 57567

Title: V ( ) Delete
Name: RISLOV, GERALD
Address: BX 93
City-St-Zip: PHILIP, SD 57567

Title: ST ( ) Delete
Name: KROETCH, KAREN
Address: BX 122
City-St-Zip: PHILIP, SD 57567

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: KAREN KROETCH ST 02/10/2006

Electronic Signature of Signing Officer or Director Date