

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002597

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** DUCKWALL-ALCO STORES, INC.

**Current Principal Place of Business:**

401 COTTAGE STREET  
ABILENE, KS 67410

**New Principal Place of Business:**

**Current Mailing Address:**

401 COTTAGE STREET  
ABILENE, KS 67410

**New Mailing Address:**

**FEI Number:** 48-0201080

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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

**OFFICERS AND DIRECTORS:**

Title: S  
Name: BOGAN, BRENT  
Address: 401 COTTAGE STREET  
City-St-Zip: ABILENE, KS 67410

Title: P  
Name: WILSON, RICHARD  
Address: 401 COTTAGE STREET  
City-St-Zip: ABILENE, KS 67410

Title: CFO  
Name: PETERSON, WAYNE  
Address: 401 COTTAGE STREET  
City-St-Zip: ABILENE, KS 67410

Title: CD  
Name: WINSTEN, ROYCE  
Address: 401 COTTAGE STREET  
City-St-Zip: ABILENE, KS 67410

Title: T  
Name: BRIAN, ASSMUS  
Address: 401 COTTAGE STREET  
City-St-Zip: ABILENE, KS 67410

Title: AT  
Name: FAHEY, SHEILA  
Address: 401 COTTAGE  
City-St-Zip: ABILENE, KS 67410

I hereby 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 all other like empowered.

**SIGNATURE:** SHEILA FAHEY

AT

04/19/2011

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

\_\_\_\_\_  
Date