

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002710

Entity Name: SHUCK-BRITSON, INC.

FILED
Mar 06, 2009
Secretary of State

Current Principal Place of Business:

2409 GRAND AVENUE
DES MOINES, IA 50312

New Principal Place of Business:

Current Mailing Address:

2409 GRAND AVENUE
DES MOINES, IA 50312

New Mailing Address:

FEI Number: 42-1067607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR.
SUITE 4
WESTON, FL 33331 US

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: LETA SINGLETON, ASSIST. SEC.

03/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MONSON, TIMOTHY J
Address: 2409 GRAND AVENUE
City-St-Zip: DES MOINES, IA 50312

Title: V () Delete
Name: SHERWOOD, MATTHEW J
Address: 2409 GRAND AVENUE
City-St-Zip: DES MOINES, IA 50312

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MONSON, TIMOTHY J
Address: 2409 GRAND AVENUE
City-St-Zip: DES MOINES, IA 50312

Title: V (X) Change () Addition
Name: MOELLER, DAVID N
Address: 2409 GRAND AVENUE
City-St-Zip: DES MOINES, IA 50312

Title: ST () Change (X) Addition
Name: MOORE, SHERRI A
Address: 2409 GRAND AVENUE
City-St-Zip: DES MOINES, IA 50312

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY J. MONSON

PD

03/06/2009

Electronic Signature of Signing Officer or Director

Date