

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005378

FILED  
Jan 05, 2012  
Secretary of State

Entity Name: WOODMEN FOUNDATION, INC.

**Current Principal Place of Business:**

1700 FARNAM ST  
STE 2757  
OMAHA, NE 68102

**New Principal Place of Business:**

**Current Mailing Address:**

1700 FARNAM ST  
STE 2757  
OMAHA, NE 68102

**New Mailing Address:**

FEI Number: 20-4743934      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:**

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: P  
Name: HERNANDEZ, PAMELA J  
Address: 1700 FARNAM ST, STE 2757  
City-St-Zip: OMAHA, NE 68102

Title: V  
Name: KING, LARRY R  
Address: 1700 FARNAM ST, STE 2757  
City-St-Zip: OMAHA, NE 68102

Title: S  
Name: CUMMINS, DANNY E  
Address: 1700 FARNAM ST, STE 2757  
City-St-Zip: OMAHA, NE 68102

Title: T  
Name: SCHREIER, MARK  
Address: 1700 FARNAM ST, STE 2757  
City-St-Zip: OMAHA, NE 68102

Title: ASTR  
Name: MAWSON, JORDAN  
Address: 1700 FARNAM ST, STE 2757  
City-St-Zip: OMAHA, NE 68102

Title: ASTR  
Name: DEVINE, ANNETTE M  
Address: 1700 FARNAM ST, STE 2757  
City-St-Zip: OMAHA, NE 68102

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JORDAN MAWSON

ASTR

01/05/2012

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

\_\_\_\_\_ Date