

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000005101

Entity Name: SNI COMPANIES CORP.

FILED  
Apr 13, 2010  
Secretary of State

**Current Principal Place of Business:**

4600 WESTOWN PKWY BLDG 6 SUITE 113  
WEST DES MOINES, IA 50266

**New Principal Place of Business:**

**Current Mailing Address:**

4600 WESTOWN PKWY BLDG 6 SUITE 113  
WEST DES MOINES, IA 50266

**New Mailing Address:**

FEI Number: 27-1342559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHAUL, MARK  
9050 PINES BLVD SUITE 460  
PEMBROKE PINES, FL 33024 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: D  
Name: WEGENER, TIMOTHY P  
Address: 625 FOURTH AVENUE SOUTH  
City-St-Zip: MINNEAPOLIS, MN 55415

Title: PCEO  
Name: WEGENER, TIMOTHY P  
Address: 625 FOURTH AVENUE SOUTH  
City-St-Zip: MINNEAPOLIS, MN 55415

Title: S  
Name: WEGENER, TIMOTHY P  
Address: 625 FOURTH AVENUE SOUTH  
City-St-Zip: MINNEAPOLIS, MN 55415

Title: PRES  
Name: SCHAUL, MARK  
Address: 4600 WESTOWN PKWY #113  
City-St-Zip: WEST DES MOINES, IA 50266

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: MARK SCHAUL

PRES

04/13/2010

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

\_\_\_\_\_ Date