

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PA-1

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

97 AUG -8 PM 1:46

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # F93000001736 (8)

1. Corporation Name
BRENTON INVESTMENTS, INC.

Principal Place of Business
**400 LOCUST.
 STE 230
 DES MOINES IA 50309
 US**

Mailing Address
**P.O. BOX 0891
 DES MOINES IA 50304-0891**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

3. Date Incorporated or Qualified
04/08/1993

3a. Date of Last Report
03/05/1996

4. FEI Number
42-1378382

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
 1201 HAYS STREET
 SUITE 105
 TALLAHASSEE FL 32301**

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME **KARYN, M SHIRBROUN**
 STREET ADDRESS **400 LOCUST STE 230**
 CITY-ST-ZIP **DES MONIES IA**

1.1 TITLE Change Addition
 1.2 NAME **Sr. Vice President**
 1.3 STREET ADDRESS **Michael R Thies**
 1.4 CITY-ST-ZIP **400 Locust St. Ste 230
 Des Moines Ia 50309**

TITLE DELETE
 NAME **C ROBERT BRENTON**
 STREET ADDRESS **400 LOCUST STE 300**
 CITY-ST-ZIP **DES MONIES IA**

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE DELETE
 NAME **C ROBERT BRENTON**
 STREET ADDRESS **400 LOCUST STE 300**
 CITY-ST-ZIP **DES MONIES IA**

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE DELETE
 NAME **PIPER/BACH, ELIZABETH**
 STREET ADDRESS **912 27TH ST.**
 CITY-ST-ZIP **WEST DES MOINES IA 50265**

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Handwritten Signature]*

CR2E034 (4/97)

pg 2

BOARD OF DIRECTORS OF BRENTON INVESTMENTS, INC.

C. ROBERT BRENTON
400 LOCUST STREET STE 300
DES MOINES, IA 50309

(You have this one listed twice on front page)

CATHERINE J. REED
400 LOCUST STREET STE 300
DES MOINES, IA 50309

HUBERT G. FERGUSON
3524 BELDEN DRIVE NE
MINNEAPOLIS MN 55418

MARSHA A. FINDLAY
13631 UNIVERSITY
CLIVE, IA 50325

MICHAEL K TRACY
2840 INGERSOLL AVE.
DES MOINES, IA 50312

LORAS NEUROTH
101 E. CHURCH STREET
MARSHALLTOWN, IA 50158

Brenton Investments, Inc.
400 Locust, Suite 230
Des Moines, Iowa 50309
Phone: 515-237-5298
Fax: 515-237-5311 Wats: 800-593-5298

Brenton Insurance, Inc.
102 South Center Street
Marshalltown, Iowa 50158
Phone: 515-752-4618
Fax: 515-753-0557

pg 3

BRENTON *Investments*
Member NASD/SIPC

BRENTON *Insurance*

July 22, 1997

Division of Corporations
Annual Reports Section
PO Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Enclosed is the Annual Report 1997 with a check for \$ 165.00. Our firm Brenton Investments, Inc. never did receive the original notice of this report. I apologize for any inconvenience this may have caused you.

If you have any questions, please do not hesitate to notify me.

Sincerely,

Susan Fagen
Susan Fagen

