

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # F94000002235

1. Entity Name
BRANDT CONSOLIDATED, INC.



Principal Place of Business
**211 W. ROUTE 125
PLEASANT PLAINS, IL 62677**

Mailing Address
**BOX 350
PLEASANT PLAINS, IL 62677**



04232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
37-0795348

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BRANDT, GLEN
27040 HICKORY BLVD.
BONITA SPRINGS, FL 33923**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

U000000749188
05/18/07-80010-023 150.00

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	BRANDT, GLEN
STREET ADDRESS	1855 S. WIGGINS
CITY-ST-ZIP	SPRINGFIELD, IL 62704
TITLE	V
NAME	RICE, FRED
STREET ADDRESS	59 FRONTIER LAKE DRIVE
CITY-ST-ZIP	SPRINGFIELD, IL 62707
TITLE	ST
NAME	THOMAS, EVELYN
STREET ADDRESS	3108 HUNTINGTON WOODS DRIVE
CITY-ST-ZIP	SPRINGFIELD, IL 62704
TITLE	V
NAME	MCARDLE, TIM
STREET ADDRESS	607 COUNTRY CLUB LANE
CITY-ST-ZIP	PEKIN, IL 61554
TITLE	P
NAME	BRANDT, RICK
STREET ADDRESS	13167 SR 125
CITY-ST-ZIP	PLEASANT PLAINS, IL 62677
TITLE	V
NAME	ENGEL, WILLIAM
STREET ADDRESS	211 GLENN OAK
CITY-ST-ZIP	ATHENS, IL 62613

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Fred Rice Fred Rice vice-pres 4-23-07 217-626-1123
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #