

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # F94000002582**

1. Entity Name  
**DAIRY FARMERS OF AMERICA, INC.**



Principal Place of Business  
**10220 N AMBASSADOR DR  
KANSAS CITY, MO 64153 US**

Mailing Address  
**10220 N AMBASSADOR DR  
KANSAS CITY, MO 64153 US**



01062005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**43-0905874**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**P  
HANMAN, GARY E  
10220 N EXECUTIVE HILLS BLVD  
KANSAS CITY, MO 64153**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
SEIBENBORN, BILL  
RT 1, BOX 155  
TRENTON, MO**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
KRAUS, RICARD  
D 1968 ELM ST  
STRATFORD, WI 54484**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
BUPP, JOYCE  
9715 LOOP RD  
SEVEN VALLEYS, PA 173609377**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SD  
CRONER, TOM  
3872 BUCKLEBERRY HWY  
BERLIN, PA 15530**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
PURDOM, LARRY  
RT. 2 BOX 245  
PURDY, MO 65734**

100000184872  
01/20/05-80046-022 158.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

01/06/2005 (816) 801-6455

**SIGNATURE:**

*David A. Geisler* **David A. Geisler, Corporate Vice President-Legal**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #