2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2006 8:00 am Secretary of State

DOCUMENT # F9600003325 1. Entity Name RINDERKNECHT ASSOCIATES, INC.					04-2	4-2006 90	0412 017 ***1		
1000 29TH AVE SW		Mailing Address P O BOX 369 CEDAR RAPIDS, IA 52406 US		-	y, ∪ -				
		3. Mailing Address							
2. Principal Place of Business		3. Walling Address					83111 86166 31186 11156 ITAB	B	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		•	04182006 CI	ng-P	CR2E034 (11/0	5)	
City & State		City & State			4. FEI Number 42-0959632		} -	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired		ıs Desired	□ \$8.75 / Fee Requ		
	6. Name and Address of Current	Registered Agent		7. Name and Address of New F			Registered Agent		
O T CORRORATION OVETEN				Name					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Street A	Street Address (P.O. Box Number is Not Acceptable)					
PLANTAT	IUN, FL 33324								
			City	City			FL Zip Code		
	named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or	register	red agent, or both, in the	e State of Flor	rida. I am familiar wi	h, and accept	
	nons of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered agen	t and little if applicable. (NOT	E: Registered Agent signati	ure required	when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Fin Trust Fund Contribution				\$5 . Add	.00 May Be ed to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANG	SES TO OFFI	CERS AND DIRECTO	ORS IN 11	
TITLE	S	☐ Delete	TITLE	D			☐ Chang	e 🔀 Addition	
NAME STREET ADDRESS	SHEPHERD, KATHY L 1000 29TH AVE SW		NAME STREET ADDRESS	100	IAUF, SCOTT F. XX 29TH AVE. S.	W.			
CITY-ST-ZIP	CEDAR RAPIDS, IA 52404		CITY-ST-ZIP		OAR RAPIDS, IA				
TITLE	VP	☐ Delete	TITLE	VP			☐ Chang	e 🕱 Addition	
NAME	FAY, JOSEPH		NAME	KIE	BURZ, BRAD				
STREET ADORESS CITY-ST-ZIP	1000 29TH AVE SW		STREET ADDRESS CITY-ST-ZIP		OO 29TH AVE. S. DAR RAPIDS, IA				
TITLE	CEDAR RAPIDS, IA 52404	☐ Delete	TITLE				Chang	e 🕱 Addition	
NAME	DOUGLASS, STEVEN T	r Delete	NAME		ZARMAN, KERRY			C (A) ACCITION	
STREET ADDRESS	1000 29TH AVE SW		STREET ADDRESS	100	00 29TH AVE. S.				
CITY-ST-ZIP	CEDAR RAPIDS, IA 52404		CITY-ST-ZIP	CEL	DAR RAPIDS, IA	52404			
TITLE NAME	SVP KRUG, EV	☐ Delete	TITLE NAME				☐ Chang	e	
STREET ADDRESS	1000 29TH AVE SW		STREET ADDRESS						
CITY-ST-ZIP	CEDAR RAPIDS, IA 52404		CHTY-ST-ZIP						
TITLE	PD	☐ Delete	TITLE				☐ Chanç	e 🔲 Addition	
NAME	AMOSSON, TOM		NAME						
STREET ADDRESS CITY-ST-ZIP	1000 29TH AVE SW CEDAR RAPIDS, IA 52404		STREET ADDRESS CITY-ST-ZIP						
TITLE	VP	☐ Defete	TITLE				☐ Chang	e	

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.

CITY-ST-ZIP

STREET ADDRESS

NAME

SIGNATURE: __

PARKER, GORDON

1000 29TH AVE SW

CEDAR RAPIDS, IA 52404

NAME

STREET ADDRESS

CITY-ST-ZIP

STEVEN T. DOUGLASS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-06

(319) 366-7786 x-104

Date

Daytime Phone #