

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002614

FILED
Mar 21, 2011
Secretary of State

Entity Name: FORM EQUIPMENT CORPORATION

Current Principal Place of Business:

1800 NE BROADWAY AVE
DES MOINES, IA 50313

New Principal Place of Business:

Current Mailing Address:

1800 NE BROADWAY AVE
DES MOINES, IA 50313

New Mailing Address:

FEI Number: 42-1440769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: CEO
Name: JENNINGS, A.L.
Address: 4622 MADISON AVE.
City-St-Zip: DES MOINES, IA 50310

Title: VP
Name: BENNETHUM, CURT
Address: 3810 SAWGRASS
City-St-Zip: ANKENY, IA 50023

Title: TREA
Name: LOECHER, RYAN
Address: 4456 WESTWOOD DR.
City-St-Zip: WEST DES MOINES, IA 50265

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: RYAN LOECHER

TREA

03/21/2011

Electronic Signature of Signing Officer or Director

Date