2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001044

Entity Name: RDG IA INC

FILED Jan 21, 2009 Secretary of State

| Littly Na | ille. RDG IA II | NC | | | |
|---|---|--------------------------------|---|---|--------------------------------------|
| Current Principal Place of Business: | | | New Principal Place of Business: | | |
| 301 GRAN DES MOIN | ID AVE NES, IA 50309 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 301 GRAN DES MOIN | ID AVE NES, IA 50309 | | | | |
| FEI Number | : 42-1029385 | FEI Number Applied For() | FEI Number Not App | licable () | Certificate of Status Desired (X) |
| Name and | l Address of C | urrent Registered Agent: | Name and Address of New Registered Agent: | | |
| 1201 HAYI TALLAHAS The above | ES ST. SSEE, FL 3230 | | | its registered | office or registered agent, or both, |
| SIGNATU | | | | | |
| | Electron | ic Signature of Registered Age | ent | | Date |
| Election Car | mpaign Financing | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | D () HODGIN, PHILI 301 GRAND AV DES MOINES, I | E | Title: Name: Address: City-St-Zip: | TREA (HODGIN, PHII 301 GRAND A DES MOINES | \VE |
| Title: Name: Address: City-St-Zip: | SECY () OBERLANDER, 301 GRAND AV DES MOINES, I | E | Title: Name: Address: City-St-Zip: | (|) Change ()Addition |
| Title: Name: Address: City-St-Zip: | D () PATTON, JACK 301 GRAND AV DES MOINES, I | E | Title: Name: Address: City-St-Zip: | (|) Change () Addition |
| Title: Name: Address: City-St-Zip: | PRES () SANDERS, DAN 301 GRAND AV DES MOINES, I | E | Title: Name: Address: City-St-Zip: | (|) Change ()Addition |
| Title: Name: Address: City-St-Zip: | D () DUNN, PATRIC 301 GRAND AV DES MOINES. I | E. | Title: Name: Address: City-St-Zin: | (|) Change ()Addition |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVIS G. SANDERS PRES 01/21/2009