

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 02, 2011
Secretary of State

Entity Name: STRECK LABORATORIES INC.

Current Principal Place of Business:

7002 S. 109TH ST.
LAVISTA, NE 68128

New Principal Place of Business:

Current Mailing Address:

PO BOX 45625
OMAHA, NE 68145

New Mailing Address:

FEI Number: 47-0536601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, WAYNE
1599 S. BARFIELD COURT
MARCO ISLAND, FL 34145 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: PD
Name: RYAN, CONNIE
Address: 7002 S. 109TH ST.
City-St-Zip: LAVISTA, NE 68128

Title: CD
Name: RYAN, WAYNE
Address: 7002 S. 109TH ST.
City-St-Zip: LAVISTA, NE 68128

Title: S
Name: BULAND, JEANNE
Address: 7002 S. 109TH ST.
City-St-Zip: LAVISTA, NE 68128

Title: D
Name: KROHN, ROBERT
Address: 1427 S. 85TH AVENUE
City-St-Zip: OMAHA, NE 68124

Title: D
Name: SKINNER, C M
Address: 6975 GREEN TREE DRIVE
City-St-Zip: NAPLES, FL 34108

Title: D
Name: MCCLURG, JAMES
Address: 624 PEACH STREET
City-St-Zip: LINCOLN, NE

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: CONNIE RYAN

PD

02/02/2011

Electronic Signature of Signing Officer or Director

Date