

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006432

FILED
Jan 25, 2007
Secretary of State

Entity Name: GENEX COOPERATIVE, INC.

Current Principal Place of Business:

P.O. BOX 469, 100 MBC DRIVE
SHAWANO, WI 54166

New Principal Place of Business:

100 MBC DRIVE
SHAWANO, WI 54166

Current Mailing Address:

P.O. BOX 469, 100 MBC DRIVE
SHAWANO, WI 54166

New Mailing Address:

FEI Number: 39-1958012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESLASKI, ALLAN
5811 30TH CT. E.
ELLENTON, FL 342224366 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: BOD () Delete
Name: CROCKER, JIM
Address: 56 STATION ROAD
City-St-Zip: VALLEY CITY, OH 44280

Title: BOD () Delete
Name: DANIELSON, JON W
Address: 1108 COUNTY HIGHWAY EE
City-St-Zip: CADOTT, WI 54727

Title: BOD () Delete
Name: COUTURE, JACQUES
Address: 560 UT RTE. 160
City-St-Zip: WESTFIELD, VT 05874

Title: PD () Delete
Name: HILEMAN, DAVID
Address: RD 1, BOX 300
City-St-Zip: TYRONE, PA 16686

Title: BOD () Delete
Name: FRANKS, JIMMY
Address: 279 ROSIER ROAD
City-St-Zip: WAYNESBORO, GA 30830

Title: BOD () Delete
Name: NELSON, DUANE J
Address: 18152 10TH STREET
City-St-Zip: WINTHROP, MN 55396

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BOD (X) Change () Addition
Name: VAN DYKE, CLARENCE
Address: 3950 LEE ROAD
City-St-Zip: MANHATTAN, MT 59741

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: RUEDINGER, JOHN
Address: W7222 CEMETARY ROAD
City-St-Zip: VAN DYNE, WI 54979

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TR (X) Change () Addition
Name: ROMUALD, LARRY J
Address: 100 MBC DRIVE
City-St-Zip: SHAWANO, WI 54166

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY ROMUALD

TR

01/25/2007

Electronic Signature of Signing Officer or Director

Date