2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P26279

1. Entity Name

YODER & FREY AUCTIONEERS, INC.



Principal Place of Business

1670 COMMERCE RD HOLLAND, OH 43528 US Mailing Address

1670 COMMERCE RD HOLLAND, OH 43528

US

FILED Feb 02, 2007 08:00 AM Secretary of State

Fee Required



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01162007 No Chg-P CR2E034 (11/05)

4. FEI Number		Applied For
34-0945813		Not Applicable
5 Cartificate of Status Desired	\$8.75	Additional

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

BERNATH, SHARON

HOLLAND, OH 43528

1670 COMMERCE ROAD

TITLE

NAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

			<u> </u>	<u> </u>
	named entity submits this statement for the plions of registered agent.	urpose of changing its register	red office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	applicable. (NOTE: Register	ed Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		
10.	OFFICERS AND DIREC	TORS		the street garages and the
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLARK, V. PETER 1670 COMMERCE ROAD HOLLAND, OH 43528			U00000618289
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PLETCHER, DANTE T 1670 COMMERCE ROAD HOLLAND, OH 43528			02/08/07-80024-001 150.00

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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 eath; 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.

SIGNATURE:	South	T	Dethu	DAVIE T.	PLETCHER	1-30-07	419-865-3	990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Da	14	Daytime Phone #			