

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32731

FILED
Apr 01, 2009
Secretary of State

Entity Name: ROCKY MOUNTAIN ELK FOUNDATION, INC.

Current Principal Place of Business:

5705 GRANT CREEK RD.
MISSOULA, MT 59808

New Principal Place of Business:

Current Mailing Address:

P O BOX 8249
MISSOULA, MT 598078249

New Mailing Address:

FEI Number: 81-0421425

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: PCEO () Delete
Name: ALLEN, M DAVID
Address: 5705 GRANT CREEK RD
City-St-Zip: MISSOULA, MT 59808

Title: S () Delete
Name: TRIEPKE, RODNEY
Address: 5705 GRANT CREEK RD
City-St-Zip: MISSOULA, MT 59808

Title: T () Delete
Name: PARKER, LORI
Address: 5705 GRANT CREEK RD
City-St-Zip: MISSOULA, MT 59808

Title: D () Delete
Name: BRYANT, FRED
Address: CKWRI CAMPUS BOX 218
City-St-Zip: KINGSVILLE, TX 78363

Title: D () Delete
Name: BYRANT, TERRY
Address: 65 MAIN ST
City-St-Zip: WELLSBORO, PA 16901

Title: D () Delete
Name: BUCHER, TERRY
Address: 5405 TOPEKA DR
City-St-Zip: TARZANA, CA 91356

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: ALEXANDER, BILL
Address: HC 66 BOX 70
City-St-Zip: HILLSBORO, NM 88042

Title: D (X) Change () Addition
Name: BYRANT, FRED
Address: CKWRI CAMPUS BOX 218
City-St-Zip: KINGSVILLE, TX 78363

Title: D (X) Change () Addition
Name: BRYANT, TERRY
Address: 65 MAIN ST
City-St-Zip: WELLSBORO, PA 16901

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORI PARKER

CFO

04/01/2009

Electronic Signature of Signing Officer or Director

Date