2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37961

Entity Name: RMT, INC.

FILED May 31, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 744 HEARTLAND TRAIL MADISON, WI 53717 **Current Mailing Address: New Mailing Address:** 744 HEARTLAND TRAIL MADISON, WI 53717 FEI Number: 39-1444890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition JOHANNSEN, STEPHEN D Name: Name: 744 HEARTLAND TRAIL Address: Address: City-St-Zip: MADISON, WI City-St-Zip: VΡ Title: Title: () Delete () Change () Addition Name: WILLIAM DICKRELL. Name: 744 HEARTLAND TRAIL Address: Address: MADISON, WI 53717 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition DAVIS, ERROLL D JR HARVEY, WILLIAM D Name: Name: 222 W WASHINGTON AVENUE 4902 N BILTMORE LN Address: Address: City-St-Zip: MADISON, WI 53701 City-St-Zip: MADISON, WI 53718 Title: () Delete Title: (X) Change () Addition HOFFMAN, JAMES E PROTSCH, ELIOT Name: Name: Address: 200 FIRST ST. S.E. Address: 200 FIRST ST. S.E. City-St-Zip: City-St-Zip: CEDAR RAPIDS, IA 52401 CEDAR RAPIDS, IA 52401 Title: Title: () Delete () Change () Addition MUELKER, RUTH A Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

VΡ SIGNATURE: WILLIAM DICKRELL 05/31/2005

912 CAPITAL OF TEXAS HWY S STE 300

AUSTIN, TX 787465210

Address: City-St-Zip: