

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 25 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V60024 (9)  
1. Corporation Name  
POCAHONTAS CORPORATION

Principal Place of Business  
4019 20TH PLACE SE  
#603  
CAPE CORAL FL 33904  
US

Mailing Address  
P.O. BOX A  
REINBECK IO 50669-0155  
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/21/1992		3a. Date of Last Report 03/14/1996	
21		26		4. FEI Number 65-0358134		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State		City & State REINBECK IA		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
23		28					
Zip		Country		Zip		Country	
24		25		29		30	
9. Name and Address of Current Registered Agent GUNDERSON, THOMAS H 1715 MONROE STREET SUITE B FY MYERS FL 33901				10. Name and Address of New Registered Agent			
				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL 85 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, CORDELL	1.2 NAME	
STREET ADDRESS	104 BLACKHAWK ST.	1.3 STREET ADDRESS	
CITY-ST-ZIP	REINBECK IA	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANATT, GERALD J	2.2 NAME	
STREET ADDRESS	P O BOX 535	2.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN IA	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSEN, JAMES I	3.2 NAME	
STREET ADDRESS	104 BLACKHAWK ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	REINBECK IA	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSEN, JAMES I	4.2 NAME	
STREET ADDRESS	104 BLACKHAWK STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	REINBECK IA	4.4 CITY-ST-ZIP	
TITLE	AS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAUGEN, HERMAN	5.2 NAME	
STREET ADDRESS	760 SEXTANT DRIVE, #842	5.3 STREET ADDRESS	
CITY-ST-ZIP	SANIBEL FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, GALE M JR	6.2 NAME	
STREET ADDRESS	104 BLACK HAWK STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	REINBECK IA	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(A), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or a receiver, trustee, or empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attached page with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Cordell O. Peterson President Gale M. Peterson, Vice Pres (319)345-2713

CR2E034 (9/96)