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Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-4845

AMENDED ANNUAL REPORT DOMESTIC NONPROFIT CORPORATIONS

SDCL 47-24-6, 59-11-24, 47-1A-122

Please Type or Print Clearly in Ink

FILING FEE: \$25 Make check payable to SECRETARY OF STATE

FILE DATE _____

RECEIPT NO _____

1. Corporate ID and Name

Enter Corporate ID

Enter Corporate Name

Telephone # _____

2. The jurisdiction under whose law it is formed South Dakota

3. The address of the principal executive office (business address).

Actual Street Address or Rural Route Box Number City State ZIP+4

Mailing Address, if Different from Street Address City State ZIP+4

Email Address (Optional)

4. The name of the South Dakota Registered Agent _____

Actual Street Address or Rural Route Box Number in this State City State ZIP+4

Mailing Address in this State, if Different from Street Address City State ZIP+4

Email Address (Optional)

5. The names and addresses of its principal officers and directors (governors). South Dakota Law requires at least three directors.

Principal Officer/Director/Governor Actual Street Address City State ZIP+4

6. Beneficial Interest (optional)

Owner Description of Ownership Percentage/Value

Owner Description of Ownership Percentage/Value

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty (SDCL 47-1A-129).

Dated _____

(Signature of an Authorized Person)

Email _____

(Optional)

(Printed Name)