RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5070
605-773-4845

NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: $10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $25 APPLIES TO ALL LATE FILINGS

FILE DATE 6-15-93
RECEIPT NO. 320174
RECEIVED
JUN 15 1993
Secretary of State

1. Corporate Name, Registered Agent and Registered Address:

NS007607
DAKOTA CHORALE
Box 72 James Wagner, 501 S Wisconsin St.
Mitchell SD 57301

Federal Taxpayer ID # [redacted]

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent the last day of the following month.

IF THE REGISTERED AGENT AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE PRINTED ON THE REVERSE SIDE OF THIS FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is Chorale Performances

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is $ 463.00 *
* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Wayne Klinger	President	508 E 14th	Mitchell	SD	57301
Kim Sevareid	Vice President	516 S. Main	Mitchell	SD	57301
Kay Fekas	Secretary	1509 Bridle Dr.	Mitchell	SD	57301
JAMES WAGNER	Treasurer	501 S Wisc	Mitchell	SD	57301

5. The names and addresses of directors (State law requires three). If the directors and officers are the same individuals, please re-list them and their addresses.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Wayne Klinger	Director	508 E. 14th	Mitchell	SD	57301
Kay Fekas	Director	1509 Bridle Dr.	Mitchell	SD	57301
JAMES WAGNER	Director	501 S. Wisc	Mitchell	SD	57301

The report may be signed by the chairman of the board of directors, its president, or any other officer.

Dated 6-9 19 93

By James Wagner
(Signature)

Its Treasurer
(Title)

STATE OF South Dakota
COUNTY OF Davison ss

I, Ann Nemmers, a notary public, do hereby certify that on this 9 day of June 19 93, personally appeared before me James Wagner who, being by me first duly sworn, declared that he/she is the Treasurer of Dakota Chorale that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires Dec. 14, 1999

Ann Nemmers
Notary Public

(Notarial Seal)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5070
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

FILING FEE: $5 in addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The current street address, or a statement that there is no street address, of its registered office _____ ZIP _____

3. The street address, or a statement that there is no street address, to which the registered office is to be changed is _____ ZIP _____

4. The name of its previous registered agent is _____

5. The name of its successor registered agent is * _____
   * The Consent of Registered Agent below must be completed by the agent.

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president or a vice president.

Date _____ 19____ _____ (signature)

_____ (title)

STATE OF _____
COUNTY OF _____ ss

I, _____, a notary public, do hereby certify that on this _____ day of _____ 19____, personally appeared before me _____ who, being by me first duly sworn, declared that he/she is the _____ of _____ that he/she signed the foregoing document as Officer of the corporation, and the statements therein contained are true.

My Commission Expires _____ _____ Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____ 19____ _____ (signature)

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

9 3 0 7 1 6 0 2 2 4

1993 NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: $10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $25 APPLIES TO ALL LATE FILINGS

FILE DATE 5-24-93
RECEIPT NO. 315756

RECEIVED
MAY 24 1993
Secretary of State

1. Corporate Name, Registered Agent and Registered Address:

NS-000500 MAY/90
CUSTER CITY ROCK CLUB
MASSA, JAMES F.
RR 1 BOX 105
CUSTER, SD 57730-9801

Day Time Phone # 605-673-4581

Federal Identification # _____

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE PRINTED ON THE REVERSE SIDE OF THIS FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is To Promote interest and Education in geology, mineralogy, paleontology, archeology and lapidary to groups or individuals in these Fields

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is $ 25.00 (Twenty Five Dollars)*

* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
James F. Massa	President	RR1 Box 105	Custer	S.D.	57730
Beryl Dvorak	Vice President	601 Harney St Apt 107	Custer	SD.	57730
~~Lois Massa~~	Secretary	RR1 Box 105	Custer	S.D.	57730
	Treasurer				

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please re-list them and their addresses. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Louie Stratton	Director	PO Box 695	Custer	SD	57730
Donald Massa	Director	RR1 Box 105	Custer	SD	57730
Lois Massa	Director	RR1 Box 105	Custer	SD	57730

The report must be signed by the chairman of the board of directors, or its president, or any other officer in the presence of a notary public.

Dated 5-20 1993

By [signature] James F. Massa
(Signature)

Its President
(Title)

STATE OF S.D.
COUNTY OF Custer ss

I, William S. Mercer a notary public, do hereby certify that on this 20 day of May 1993, personally appeared before me Jim Massa who, being by me first duly sworn, declared that he/she is the President of Custer City Rock Club that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 7-13-93

William S. Mercer
Notary Public

(Notarial Seal)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

FILING FEE: $5 In addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The current street address, or a statement that there is no street address, of its registered office _____ ZIP _____

3. The street address, or a statement that there is no street address, to which the registered office is to be changed (current address) is _____ ZIP _____

4. The name of its previous registered agent is _____

5. The name of its successor (current) registered agent is * _____
   * The Consent of Registered Agent below must be completed by the agent.

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

7. This change has been authorized by resolution duly adopted by the board of directors.

The statement must be signed by the chairman of the board of directors, or by its president or a vice president in the presence of a Notary Public.

Date _____ 19____.

_____ (signature)

_____ (title)

STATE OF _____
COUNTY OF _____ ss

I, _____, a notary public, do hereby certify that on this _____ day of _____ 19____, personally appeared before me _____ who, being by me first duly sworn, declared that he/she is the _____ of _____ that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires _____

_____ Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____ (name of registered agent), hereby give my consent to serve as the registered agent for _____ (corporate name)

Dated _____ 19____

_____ (signature)

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5070
605-773-4845

NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: $10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $25 APPLIES TO ALL LATE FILINGS

FILE DATE 6-15-93
RECEIPT NO. 330174
RECEIVED
JUN 15 1993
Secretary of State

1. Corporate Name, Registered Agent and Registered Address:

NS007607
DAKOTA CHORALE
Box 72 James Wagner, 501 S Wisconsin St.
Mitchell SD 57301

Federal Taxpayer ID #

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent the last day of the following month.

IF THE REGISTERED AGENT AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE PRINTED ON THE REVERSE SIDE OF THIS FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is Chorale Performances

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is $ 403.00
* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Wayne Klinger	President	508 E 14th	Mitchell	SD	57301
Kim Sevareid	Vice President	516 S. Main	Mitchell	SD	57301
Kay Fekas	Secretary	1509 Bridle Dr.	Mitchell	SD	57301
JAMES WAGNER	Treasurer	501 S Wisc	Mitchell	SD	57301

5. The names and addresses of directors (State law requires three). If the directors and officers are the same individuals, please re-list them and their addresses.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Wayne Klinger	Director	508 E 14th	Mitchell	SD	57301
Kay Fekas	Director	1509 Bridle Dr.	Mitchell	SD	57301
JAMES WAGNER	Director	501 S. Wisc	Mitchell	SD	57301

The report may be signed by the chairman of the board of directors, its president, or any other officer.

Dated 6/9 — 1993

By James Wagner
(Signature)

Its Treasurer
(Title)

STATE OF South Dakota
COUNTY OF Davison ss

I, Ann Nuzman, a notary public, do hereby certify that on this 9 day of June 1993, personally appeared before me James Wagner who, being by me first duly sworn, declared that he/she is the Treasurer of Dakota Chorale that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires July 14, 1999

Ann Nuzman
Notary Public

(Notarial Seal)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5070
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

FILING FEE: $5 in addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

2. The current street address, or a statement that there is no street address, of its registered office _____ ZIP _____

3. The street address, or a statement that there is no street address, to which the registered office is to be changed is _____ ZIP _____

4. The name of its previous registered agent is _____

5. The name of its successor registered agent is * _____
   * The Consent of Registered Agent below must be completed by the agent.

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president or a vice president.

Date _____ 19____. _____ (signature)

_____ (title)

STATE OF _____
COUNTY OF _____ ss

I, _____, a notary public, do hereby certify that on this _____ day of _____ 19____, personally appeared before me _____ who, being by me first duly sworn, declared that he/she is the _____ of _____ that he/she signed the foregoing document as Officer of the corporation, and the statements therein contained are true.

My Commission Expires _____ _____ Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____ 19____ _____ (signature)

1996
RETURN TO
SECRETARY OF STATE
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: $10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $25 APPLIES TO ALL LATE FILINGS

FILE DATE 7-30-96
RECEIPT NO. 562056

RECEIVED
JUL 30 1996
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

NS-007607 JUN/93
DAKOTA CHORALE
WAGNER, JAMES
501 S WISCONSIN ST
PO BOX 72
MITCHELL, SD 57301-0072

Day Time Phone # _____

Federal Identification # _____

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE PRINTED ON THE REVERSE SIDE OF THIS FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is performance of choral music.

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is $ 300. (Musical Scores) *
* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
David Versteeg	President	900 W 4th Ave.	Mitchell,	SD	57301
Patty Versteeg	Vice President	900 W. 4th Ave.	Mitchell,	SD	57301
Margaret King	Secretary	1008 Main St.	Armour,	SD	57313
Michael Catalano	Treasurer	606 S. Minnesota	Mitchell,	SD	57301

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please re-list them and their addresses. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
David Versteeg	Director	900 W 4th Ave.	Mitchell,	SD	57301
Patty Versteeg	Director	900 W 4th Ave.	Mitchell,	SD	57301
Margaret King	Director	1008 Main St.	Armour,	SD	57313
Michael Catalano		606 S. Minnesota	Mitchell,	SD	57301

The report must be signed by the chairman of the board of directors, or its president, or any other officer in the presence of a notary public.

Dated 7/29 19 96

By Michael J. Catalano
(Signature) must be signed in the presence of a notary

Its Treasurer
(Title)

STATE OF South Dakota
COUNTY OF Davison ss

I, Sally Merkwan, a notary public, do hereby certify that on this 29th day of July 19 96, personally appeared before me Michael J Catalano who, being by me first duly sworn, declared that he/she is the Treasurer of the corporation named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 4-1-2004

SALLY MERKWAN
NOTARY PUBLIC SOUTH DAKOTA

Sally Merkwan
Notary Public

(Notarial Seal)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

FILING FEE: * $5 In addition to annual report fee
*** No fee for postal renumbering. (must be stated on the form)**

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

_____

2. The previous registered office address: _____

_____ ZIP_____

3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____

_____ ZIP_____

4. The name of its previous registered agent is _____

5. The name of its successor (current) registered agent is _____ *
* The Consent of Registered Agent below must be completed by the new agent.

6. The street address, or a statement that there is no street address, of its registered office and the address of the office of its registered agent, as changed, will be identical. Such change was authorized by resolution duly adopted by its board of directors.

The statement must be signed by the chairman of the board of directors, or by its president or a vice president in the presence of a Notary Public.

Date_____ 19____.

_____
(signature) must be signed in the presence of a notary

_____
(title)

STATE OF_____
COUNTY OF _____ ss

I, _____, a notary public, do hereby certify that on this_____day of _____ 19____, personally appeared before me _____ who, being by me first duly sworn, declared that he/she is the _____of the corporation named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires _____

_____
Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____ 19____

SALLY MERKWAN
NOTARY PUBLIC SOUTH DAKOTA

_____
(signature)

1999

RETURN TO
SECRETARY OF STATE
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

9908198.3356

NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

FILING FEE: $10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $25 APPLIES TO ALL LATE FILINGS

FILE DATE 7/26/99
RECEIPT NO. 61521

RECEIVED
JUL 6 1999
S.D. SEC. OF STATE

RECEIVED
JUL 26 1999
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

NS-007607 JUN/96
DAKOTA CHORALE
WAGNER, JAMES
501 S WISCONSIN ST
PO BOX 72
MITCHELL, SD 57301-0072

Day Time Phone # _____

Federal Identification # _____

FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE PRINTED ON THE REVERSE SIDE OF THIS FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is performance of choral music for public entertainment and education

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is $ 1562
*Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Michael Catalano	President	606 S. Minnesota	Mitchell	SD	57301
Don Reuters	Vice President	208 E 11th Ave	Mitchell	SD	57301
Renea Schmeichler	Secretary	27071 [illegible] Ave	Pinnack	SD	57331
Jackie Hess	Treasurer	521 W 11th Ave	Mitchell	SD	57301

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please re-list them and their addresses. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Michael Catalano	Director	606 S. Minnesota	Mitchell	SD	57301
Don Reuters	Director	208 E 11th Ave	Mitchell	SD	57301
Jackie Hess	Director	521 W 11th Ave.	Mitchell	SD	57301
Renea Schmeichler		27071 [illegible] Ave.	Pinnack	SD	57331

The report must be signed by the chairman of the board of directors, or its president, or any other officer in the presence of a notary public.

Dated 7/2/ 1999

BY: _____ (Signature) must be signed in the presence of a notary

(Title) President

STATE OF South Dakota
COUNTY OF Davison ss

I, Sally Merkwan a notary public, do hereby certify that on this 2nd day of July 1999, personally appeared before me Michael Catalano who, being by me first duly sworn, declared that he/she is the _____ of the corporation named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 4-1-2004

(Notarial Seal) SALLY MERKWAN NOTARY PUBLIC SOUTH DAKOTA

Sally Merkwan
Notary Public

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

File Date_____
Receipt No._____

FILING FEE: $5 in addition to annual report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is The Dakota Chorale
2. The previous (old) registered office address c/o James Lovgren, 501 S. Wisconsin St., P.O. Box 72 Mitchell SD ZIP + 4 57301-0072
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. P.O. Box 72, Mitchell, SD 606 S. Minnesota St., Mitchell, SD 57301 (agent) ZIP + 4 57301-0072
4. The name of its previous registered agent is James Lovgren
5. The name of its successor (current) registered agent is * Michael Catalano

   *The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated 7/2/99 19___

(Signature) must be signed in the presence of a notary)

President
(Title)

STATE OF South Dakota
SS
COUNTY OF Davison

I, Sally Merkwan, a notary public, do hereby certify that on this 2nd day of July 1999, personally appeared before me Michael Catalano who, being by me first duly sworn, declared that he/she is the _____ of _____ that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 4-1-2004

(Notarial Seal) SALLY MERKWAN NOTARY PUBLIC SOUTH DAKOTA

Sally Merkwan
Notary Public

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Michael Catalano (name of registered agent) hereby give my consent to serve as the registered agent for The Dakota Chorale (corporate name)

Dated 6/21 19 99 (signature)

0020821 5.4037

2002 NONPROFIT REPORT

0020821 5.4037
8/13/02

PLEASE TYPE OR USE BLACK INK

FILING FEE: $10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF $25 APPLIES TO ALL LATE FILINGS

FILE DATE 6/25/02
RECEIPT NO. 111543
RECEIVED
JUN 25 '02

1. Corporate Name, Registered Agent and Registered Address:

-NS-007607-
NS-007607 JUN/1999
DAKOTA CHORALE
CATALANO, MICHAEL
606 S MINNESOTA ST
PO BOX 72
MITCHELL SD 57301-0072

Day Time Phone # 605-996-0725
Federal Taxpayer ID
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

IF THE REGISTERED AGENT (CONTACT PERSON) AND/OR THE REGISTERED OFFICE ADDRESS HAS CHANGED FROM THAT LISTED ON THE MAILING LABEL ABOVE, THE STATEMENT OF CHANGE FORM IS REQUIRED TO BE COMPLETED.

2. The nature of the affairs which the corporation is conducting in South Dakota is providing choral music for the Mitchell Community and the surrounding area

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.

B. The amount of property presently held by the corporation is $ 560 .
* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Michael Catalano	President	606 S. Minnesota St.	Mitchell	SD	57301
Jim Lefferts	Vice President	1306 W Ash St.	Mitchell	SD	57301
Jackie Hess	Secretary	521 W. 11th St.	Mitchell	SD	57301
Michael Catalano	Treasurer	606 S. Minnesota	Mitchell	SD	57301

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please re-list them and their addresses. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
Michael Catalano	Director	606 S. Minnesota St.	Mitchell	SD	57301
Jim Lefferts	Director	1306 W. Ash St.	Mitchell	SD	57301
Jackie Hess	Director	521 W. 11th St.	Mitchell	SD	57301

The report must be signed by the chairman of the board of directors, or its president, or any other officer in the presence of a notary public.

Dated 6/19/02

By _____ (Signature)

Its President (Title)

STATE OF South Dakota
COUNTY OF Davison ss

On this the 19th day of June, 2002, before me, Notarial Officer, personally appeared Michael T Catalano, known to me, or proved to me, to be the person of the corporation that is described in and that executed the within instrument and acknowledged to me that such corporation executed the same.

My Commission Expires 4-1-2004 (Notarial Seal)

SALLY MERKWAN NOTARY PUBLIC SOUTH DAKOTA

Notary Public

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845 FAX (605) 773-4550
www.state.sd.us/sos/sos.htm

nsar.pdf

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
Fax (605) 773-4550

NON-PROFIT
STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

FILING FEE: $5 in addition to corporate report fee

Pursuant to the provisions of the South Dakota Corporation Acts, the undersigned corporation submits the following statement for the purpose of changing its registered office and/or its registered agent in the state of South Dakota.

1. The name of the corporation is _____

_____

2. The previous street address, or a statement that there is no street address, or its registered office _____

_____ ZIP _____

3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. _____

_____ ZIP _____

4. The name of its previous registered agent is _____

5. The name of its successor (current) registered agent is * _____

*The Consent of Registered Agent below must be completed by the new agent.

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.

7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated _____ _____
(Signature) must be signed in the presence of a notary)

_____
(Title)

STATE OF _____ ss
COUNTY OF _____

I, _____, a notary public, do hereby certify that on this _____ day of _____, personally appeared before me _____ who, being by me first duly sworn, declared that he/she is the _____ of _____ that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires _____ _____
Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____ _____
(signature of registered agent)

340 3773 07/06/2005

State of South Dakota

OFFICE OF THE SECRETARY OF STATE

Certificate of Administrative Dissolution

(DB, DF, DL, CO, NS, CH)

I, Chris Nelson, Secretary of State of the State of South Dakota, by virtue of the authority vested in me by SDCL 47-7-30.1, § 47-18-16.4, § 47-34A-810 and § 47-24-13.2 hereby Administratively Dissolve the below named for failure to file the annual report when due.

NS007607

NS007607
DAKOTA CHORALE
CATALANO, MICHAEL
606 S MINNESOTA ST
PO BOX 72
MITCHELL SD 57301-0072

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this June 17, 2005.

Chris Nelson

Chris Nelson
Secretary of State

Litho. in U.S.A.
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State Capitol Suite 204
500 East Capitol Avenue
Pierre SD 57501-5070

605-773-4845

Secretary of State

Chris Nelson
Secretary of State

Chad Heinrich
Deputy

340 3772

NS007607

NS007607
CATALANO, MICHAEL
DAKOTA CHORALE
606 S MINNESOTA ST
PO BOX 72
MITCHELL SD 57301-0072

April 8, 2005

DOMESTIC AND FOREIGN DELINQUENT NOTICE OF PENDING ADMINISTRATIVE DISSOLUTION OR REVOCATION

This letter is being sent pursuant to SDCL and is notification that the annual report on behalf of the above named entity that was due during the anniversary month of incorporation or qualification in South Dakota has not yet been filed. The referenced delinquent report may be the report that was due in 2004 or January through March 2005. Organizational information, date of filing and status is available on our web site at www.sdsos.gov .

The annual report form for each year delinquent must be filed with the Secretary of State PRIOR to June 16, 2005 together with the appropriate fee and penalty. Failure to file a correct report together with the fees prior to that date will result in Administrative Dissolution or Revocation.

SOUTH DAKOTA ENTITIES The annual report form was previously mailed to the registered office address listed with our office.

FOREIGN (OUT-OF-STATE ENTITIES) The previous annual report form was mailed directly to the corporation, but because the report was not filed we are required to notify the registered agent at this time. *Please forward this notice to the corporation for prompt attention.*

If the registered agent and/or address have changed, the law requires a Statement of Change of Registered Agent and Address form to be filed along with the additional filing fee.

The annual report form, the statement of change form and access to all South Dakota Laws regarding this notice may be obtained from our web site at the following address www.sdsos.gov or by contacting the Secretary of State's Office, Corporate Division at 605-773-4845.

If the report was previously submitted to our office and we returned it for further information, please promptly resubmit the completed form. The deadline for filing is June 16, 2005 and no extension will be given. Also note, that reports received in our office after March 31, 2005 may not have been updated on the computer prior to this delinquent notice.

Thank you for your prompt attention to this matter.
