

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

1993 7 1 6 8 3 5
ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 6-25-93
RECEIPT NO. 21143

RECEIVED

JUN 25 1993

Secretary of State

1. Corporate Name, Registered Agent and Registered Address:

DB-031918 JUL/00
CORNER (R.F.) CONSTRUCTION CORPORAT
CORNER, ROBERT F.
PO BOX 3040
1401 OMAHA ST
RAPID CITY, SD 57709-3040

Telephone # 605-342-1522
FAX # 605-342-6524

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

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota GENERAL CONTRACTOR

3. The names and addresses of its directors and officers: (Both officers and directors must be listed in the spaces provided).

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP-4
<u>JOSEPH M. BUTER</u>	Director	<u>818 ST JOE ST.</u>	<u>RAPID CITY</u>	<u>SD</u>	<u>57701</u>
<u>KENT MUNDON</u>	Director	<u>3272 LIEN ST.</u>	<u>RAPID CITY</u>	<u>SD</u>	<u>57702</u>
<u>ROBERT F. CORNER</u>	President	<u>Rte B, Box 4780</u>	<u>RAPID CITY</u>	<u>SD</u>	<u>57702</u>
	Vice President				
<u>NANCY ERICKSON</u>	Secretary / Treasurer	<u>1401 OMAHA</u>	<u>RAPID CITY</u>	<u>SD</u>	<u>57702</u>
	Treasurer				

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
5,000 COMMON \$100/SHARE

5. NUMBER OF SHARES ISSUED CLASS SERIES
100 COMMON

6. The amount of its stated capital is \$ 10,000

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

Dated JUNE 22 19 93

By Robert F. Corner
(Signature)
its PRESIDENT
(Title)

STATE OF South Dakota
COUNTY OF Pennington as

I, Nancy B. Erickson, a notary public, do hereby certify that on this 22nd day of June 19 93

personally appeared before me Robert F. Corner who, being by me first duly sworn, declared that he/she is the
President of Corner Construction Corporation

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires [Redacted]

Nancy B. Erickson
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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers 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, _____, 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
 FAX (605) 773-4550

91993 7 1 6 8 3 5
ANNUAL REPORT

FILE DATE 7-1-93
 RECEIPT NO. 322094
 RECEIVED
 JUN 28 1993
 Secretary of State

DOMESTIC
 PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
 ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

1. Corporate Name, Registered Agent and Registered Address:

DF-016845 JUL/92
 CENTENNIAL PRAIRIE RANCH, INC.
 BAKER, GLENN P.
 RR 2 BOX 417
 SPEARFISH, SD 57783-0716

Telephone # (605) 578-1677

FAX # _____

Federal Taxpayer ID _____

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

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota _____

3. The names and addresses of its directors and officers: (Both officers and directors must be listed in the spaces provided).

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
_____	Director	_____	_____	_____	_____
_____	Director	_____	_____	_____	_____
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
_____	_____	_____	_____

5. NUMBER OF SHARES ISSUED _____ CLASS _____ SERIES _____

6. The amount of its stated capital is \$ _____

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

Dated 6/25 19 93

By Holly I. Baker
 (Signature)
 Its Secretary/Treas
 (Title)

STATE OF SOUTH DAKOTA
 COUNTY OF MEADE ss

I, Donna Eixenberger, a notary public, do hereby certify that on this 25th day of June 19 93,
 personally appeared before me Holly I. Baker who, being by me first duly sworn, declared that he/she is the
 Sec./Treas. of Centennial Prairie Ranch, Inc.

that he/she signed the foregoing document as Donna Eixenberger of the corporation, and the statements therein contained are true.
 My Commission Expires _____ Notary Public Donna Eixenberger
 My Commission Expires December 11, 1994 Notary Public

(Notarial Seal)

SOS CRP 410 10/92

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 previous street address, or a statement that there is no street address, of its registered office _____
ZIP + 4 _____
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 _____
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 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers 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, _____, 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
FAX (605) 773-4550

9 0 0 7 1 3 0 3 5 0 2

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
NO FILING FEE

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

FILE DATE 7-1-93
FILE NO. _____

FILED

JUN 28 1993

Secretary of State

Pursuant to the provisions of SDCL 47-9A, the undersigned corporation hereby submits the following corporate farming annual report

1 The name of the corporation is Centennial Prairie Ranch, Inc DB-16945

The state of incorporation is South Dakota

2 The name of the registered agent in South Dakota and the registered office address is Glenn P. Baker
Route 3, Box 417, Spearfish, S.D. Zip + 4 57783-9716

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

4. List only the changes since the last report of the acreage and location by section, township, and county of each lot or parcel of land in this state owned or leased by the corporation.

None

5. List only the changes of the names or addresses of the officers and directors

NAME REPLACED AS OFFICER OR DIRECTOR

None

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is All.
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

7. List changes only of names, address and number of shares owned by shareholders

NAME ADDRESS NUMBER OF SHARES DEGREE OF KINDRED

8 The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 6/25 19 93

By Holly I. Baker
(Signature)
is Secretary/Treas
(Title)

STATE OF SOUTH DAKOTA
COUNTY OF MEADE ss

I, Donna Eixenberger, a notary public, do hereby certify that on this 25th day of June 19 93

personally appeared before me Holly I. Baker who, being by me first duly sworn, declared that he/she is the Sec./Treas. of Centennial Prairie Ranch that he/she signed the foregoing document

as officer of the corporation, and the statements therein contained are true

My Commission Expires Donna Eixenberger
Notary Public

Donna Eixenberger
Notary Public

My Commission Expires December 11, 1994

(Notary Seal)

SDS 005 110 10-92

1994

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

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE _____
RECEIPT NO. 455258

750

1. Corporate Name, Registered Agent and Registered Address:

~~XXXXXXXXXX~~
DB031918 CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F
~~XXXXXXXXXX~~ 1555 Rand Road
~~XXXXXXXXXX~~ PO Box 9698
~~XXXXXXXXXX~~ Rapid City, SD 57709-
9698

Telephone # 605-348-7879
FAX # 506-348-8382

Federal Taxpayer ID XXXXXXXXXX

FILING DATE: Due during the month the
Certificate of Incorporation was **RECEIVED**
and delinquent the last day of the following
month

MAR 28 1995

S.D. SEC. OF STATE

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota General Contractor

3. The names and addresses of its directors and officers (Both officers and directors must be listed in the spaces provided).

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
<u>Joseph M. Butler</u>	Director	<u>818 St. Joseph St.</u>	<u>Rapid City</u>	<u>SD</u>	<u>57701</u>
<u>Kent Mundon</u>	Director	<u>3272 Lien St.</u>	<u>Rapid City,</u>	<u>SD</u>	<u>57702</u>
<u>Robert F. Corner</u>	President	<u>Rte 8, Bx 4780</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>
	Vice President				
<u>Nancy B. Ericksen</u>	Secretary	<u>1401 Omaha</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>
<u>Nancy B. Ericksen</u>	Treasurer	<u>1401 Omaha</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class.

NUMBER OF SHARES CAN ISSUE CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
5,000. Common \$100/Share

5. NUMBER OF SHARES ISSUED ~~1000~~ CLASS Common SERIES

6. The amount of its stated capital is \$ 10,000.00

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

Dated March 16 19 95

By Robert F. Corner
(Signature) Robert F. Corner
Its President
(Title)

STATE OF South Dakota
COUNTY OF Pennington SS

I, Marilyn L. McKibben, a notary public, do hereby certify that on this 16th day of March 19 95,
personally appeared before me Robert F. Corner who, being by me first duly sworn, declared that he/she is the
President of Corner Construction Corporation

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
My Commission Expires XXXXXXXXXX
Marilyn L. McKibben
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

SECRETARY OF STATE
STATE CAPITOL
600 E. CAPITOL
PIERRE, S.D. 57501-3077
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.

- The name of the corporation is R.F. CORNER CONSTRUCTION CORPORATION
- The previous street address, or a statement that there is no street address, of its registered office, 1401 Omaha St Box 3040 Rapid City SD ZIP + 4 57709-3040
- The street address, or a statement that there is no street address, to which the registered office is to be changed is 1555 Rand Road, PO Box 9698 Rapid City SD 57709-9698 ZIP + 4 _____
- The name of its previous registered agent is ROBERT F. CORNER CORNER
- The name of its successor registered agent is _____
* The Consent of Registered Agent below must be completed by the new agent.
- The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
- 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 by another of its officers in the presence of a notary public.

Date March 24 19 95,
Robert F. Corner
(signature) Robert F. Corner
President
(title)

STATE OF South Dakota
COUNTY OF Pennington SS

I, Marilyn L. McKibben, a notary public, do hereby certify that on this 24th day of March 19 95, personally appeared before me Robert F. Corner who, being by me first duly sworn, declared that he/~~she~~ is the President of Corner Construction Corporation that he/~~she~~ signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires June 28, 2002
Marilyn L. McKibben
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)

1M

65041771337
1/19/96

Receipt Number: 455258

File Number: 08031918

STATEMENT OF CHANGE
For
P.F. CONSTRUCTION CORPORATION

File at the request of:
CORNER CONSTRUCTION CORPORATION
1555 RAND ROAD
PO BOX 9638
RAPID CITY SD 57703-9638

STATE OF SOUTH DAKOTA
OFFICE OF THE SECRETARY OF STATE

SS.

Filed in the office of Secretary of State on
March 28, 1996.

Joyce Hazeltine
Secretary of State

Fee Received \$5.00

SOS CFF 491 10/93

1995

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

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 11/29/95
RECEIPT NO. 472337
RECEIVED
1995

1. Corporate Name, Registered Agent and Registered Address:

DB-031918 JUL 94
CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F
1505 RAND ROAD
PO BOX 9698
RAPID CITY, SD 57709-9698

Telephone # 605-348-7879
FAX # 605-348-8382
Federal Taxpayer ID # [REDACTED]

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

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota General Contractor

3. The names and addresses of its directors and officers. (Both officers and directors must be listed in the spaces provided).

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
<u>Joseph A. Butler</u>	Director	<u>318 St. Joseph St</u>	<u>Rapid City</u>	<u>SD</u>	<u>57701</u>
<u>Kent Muddon</u>	Director	<u>3272 Union Street</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>
<u>Robert F. Corner</u>	President	<u>Rte 8, Box 4780</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>
	Vice President				
<u>nancy B. Erickson</u>	Secretary	<u>1401 Omaha</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>
<u>Nancy B. Erickson</u>	Treasurer	<u>1401 Omaha</u>	<u>Rapid City</u>	<u>SD</u>	<u>57702</u>

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class

NUMBER OF SHARES CAN ISSUE	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
<u>\$5,000.00</u>	<u>Common</u>		<u>\$100.00/Share</u>

5. NUMBER OF SHARES ISSUED 100 CLASS Common SERIES

6. The amount of its stated capital is \$ 10,000.00

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

Dated June 12 19 95
By Robert F. Corner
(Signature) Robert F. Corner
Its President
(Title)

STATE OF South Dakota
COUNTY OF Pennington ss

I, Mariya J. McKibben, a notary public, do hereby certify that on this 12 day of June 19 95 personally appeared before me Robert F. Corner who, being by me first duly sworn, declared that he/she is the President of Corner Construction Corporation

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
My Commission Expires June 28, 2002
Mariya J. McKibben
Notary Public

SECRETARY OF STATE
STATE CAPITOL
600 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 _____

2. The previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date _____ 19_____

(signature)

(title)

STATE OF _____
COUNTY OF _____ 65

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

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

1 Corporate Name, Registered Agent and Registered Address

DB 031218 JUL/95
CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F.
1555 RAND ROAD
PO BOX 9698
RAPID CITY, SD 57709-9698

FILE DATE 7-11-96
RECEIPT NO. 58,275

RECEIVED

JUL 11 1996

S.D. SEC. OF STATE

Telephone # _____
FAX # _____
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.

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2 The character of the business in which it is actually engaged in South Dakota _____

3 The names and addresses of its directors and officers

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.
Do the above listed officers serve also as directors? YES _____ NO _____ If no, list directors below.
Director _____
Director _____

4 The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class
NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5 NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6 The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated June 20, 1996 By Robert F. Corner

(Signature)
Its PRESIDENT (Title)

STATE OF SOUTH DAKOTA
COUNTY OF PENNINGTON ss

I, LYLIA J. MONELLO, a notary public, do hereby certify that on this 20th day of June 1996,

personally appeared before me ROBERT F. CORNER who, being by me first duly sworn, declared that he is the PRESIDENT of CORNER (R.F.) CONSTRUCTION CORPORATION

and that he signed the foregoing document as officer of the corporation, and the statements therein contained are true.
My Commission Expires FEB. 21, 2001

Lylia J. Monello
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**

File Date: _____
Receipt No.: _____

FILING FEE: \$6 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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date _____ 19 _____

(signature)

(title)

STATE OF _____
COUNTY OF _____ 56

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)

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S. D. 57601-5077
605-773-4845

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

File Date: _____
Receipt No: _____

FILING FEE: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers 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, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____ 19 _____

(signature)

1998
 RETURN TO
 SECRETARY OF STATE
 STATE CAPITOL
 500 E. CAPITOL
 PIERRE, S.D. 57501-5070
 605-773-4845
 FAX (605) 773-4550

ANNUAL REPORT
 DOMESTIC
 PLEASE TYPE OR USE BLACK INK

FILE DATE 7-1-98
 RECEIPT NO. 723112

RECEIVED

JUN 29 1998

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE
 ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB-031918 JUL/97
 CORNER (R.F.) CONSTRUCTION CORPORATION
 CORNER, ROBERT F.
 1555 RAND ROAD
 PO BOX 9698
 RAPID CITY, SD 57709-9698

Telephone # _____

FAX # _____

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.

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota _____

3. The names and addresses of its directors and officers

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP - 4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

Director _____
 Director _____

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated June 26th 1998

By Robert F. Corner
 (Signature)
 its President
 (Title)

STATE OF South Dakota
 COUNTY OF Pennington ss

I, John M. Ingmann, a notary public, do hereby certify that on this 26 day of June 1998, personally appeared before me Robert F. Corner who, being by me first duly sworn, declared that he/she is the President of Corner Construction Corporation that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires Feb 14 2001

John M. Ingmann
 Notary Public

(Notarial Seal)

SOS CRP 6/97

SECRETARY OF STATE
STATE CAPITOL
600 E. CAPITOL
PIERRE, S.D. 57501-5070
605-773-4846

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

File Date: _____
Receipt No.: _____

FILING FEE: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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 must be signed by the chairman of the board of directors, or by its president, or by another of its officers 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, _____, hereby give my consent to serve as the
(name of registered agent)
registered agent for _____
(corporate name)

Dated _____ 19 _____

(signature)

1999

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

997019 84783

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 7.27.99
RECEIPT NO. 87740
RECEIVED

JUL 27 1999

S.D. REG. OFFICER
S.D. CLERK OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB-031918 JUL/98
CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F.
1555 RAND ROAD
PO BOX 9698
RAPID CITY, SD 57709-9698

Telephone # _____
FAX # _____
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.

*** ATTENTION - FILING INSTRUCTIONS ***

if ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota _____

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

Director _____
Director _____

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated June 22 1999

By Robert F. Corner
(Signature)
Its President
(Title)

STATE OF South Dakota ss
COUNTY OF Pennington

I, Kathy I. Steady, a notary public, do hereby certify that on this 22nd day of June 1999,

personally appeared before me Robert F. Corner who, being by me first duly sworn, declared that he/she is the President of Corner Construction Corporation the corporation

named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 12/10/04

Kathy I. Steady
Notary Public

(Notarial Seal)

SOS CRP 6/98

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: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
ZIP + 4 _____
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 _____
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 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 _____ 19 _____

(Signature)

(Title)

STATE OF _____ ss
COUNTY OF _____

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)

2000

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

ANNUAL REPORT 4047
9/14/00

DOMESTIC

PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 8-8-00
RECEIPT NO. 904342

RECEIVED

RECEIVED

AUG 8 '00

JUL 19 '00

S.D. SEC. OF STATE

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB-031916 JUL/1999
CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F.
1555 RAND ROAD
PO BOX 9698
RAPID CITY SD 57709-9698

Telephone # _____
FAX # _____
Federal Taxpayer II
FILING DATE: Due during the month the
Certificate of Incorporation was issued, and
delinquent after the last day of the following
month.

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota _____

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

Director _____
Director _____

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated July 17, 2000

By Robert F. Corner
(Signature)
its President
(Title)

STATE OF South Dakota ss
COUNTY OF Pennington

On this the 17th day of July, 2000, before me, Kathy L. Steady,

personally appeared Robert F. Corner, known to me, or proved to me, to be the President 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 12/10/04

Kathy L Steady
Notary Public

(Notarial Seal)

SOS CRP 11/99

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: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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) _____
_____ (Title) _____

STATE OF _____ ss
COUNTY OF _____

On this the ____ day of _____, 20____, before me, _____
personally appeared _____, known to me, or proved to me,
to be the _____ 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 _____ 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) _____

SDNONN9NON9

2001

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

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

0107209.2976
7/18/01

FILE DATE 7-1-01
RECEIPT NO. 99072

RECEIVED

JUN 13 '01

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB-031918 JUL/2000
CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F.
1555 RAND ROAD
PO BOX 9698
RAPID CITY SD 57709-9698

Telephone # 605-348-7879
FAX # 605-348-9327

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

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota _____

3. The names and addresses of its directors and officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
_____	President	_____	_____	_____	_____
_____	Vice President	_____	_____	_____	_____
_____	Secretary	_____	_____	_____	_____
_____	Treasurer	_____	_____	_____	_____

SD law requires at least one director.

Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

Director _____
Director _____

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated _____

By Robert F. Corner
(Signature)
Its President
(Title)

STATE OF South Dakota
COUNTY OF Pennington ss

On this the 4th day of June, 2001, before me, Kathy L. Steady
personally appeared Robert F. Corner, known to me, or proved to me,
to be the President 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 12/10/04

Kathy L. Steady
Notary Public

(Notarial Seal)

SOS CRP 11/00

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: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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) _____
_____ (Title) _____

STATE OF _____ ss
COUNTY OF _____

On this the ____ day of _____, 20____, before me, _____, known to me, or proved to me, personally appeared _____, to be the _____ 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 _____ 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) _____

2002-03-19-18

2002

ANNUAL REPORT

DOMESTIC PLEASE TYPE OR USE BLACK INK

FILING FEE: \$25 MAKE CHECK PAYABLE TO SECRETARY OF STATE ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

0208216.1867 8/13/02

FILE DATE 7-16-02 RECEIPT NO. 119707 RECEIVED

JUL 16 02

1. Corporate Name, Registered Agent and Registered Address:



DB-031918 JUL/2001 CORNER (R.F.) CONSTRUCTION CORPORATION CORNER, ROBERT F. 1555 RAND ROAD PO BOX 9698 RAPID CITY SD 57709-9698

Telephone # (605) 348-578 DBSTATE FAX # (605) 348-8387

Federal Taxpayer IC

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

***** ATTENTION - FILING INSTRUCTIONS *****

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

[X] ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota

Table with 7 columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows for President, Vice President, Secretary, Treasurer.

SD law requires at least one director. Do the above listed officers serve also as directors? YES ___ NO ___ If no, list directors below.

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class: NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ (Money received for issued shares)

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

Dated [redacted] By Robert F. Corner (Signature) Its President (Title)

STATE OF South Dakota COUNTY OF Pennington ss

On this the 18th day of June 2002 before me, Marie J. Strohm personally appeared Robert F. Corner

to be the President 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 March 7, 2006 Marie J. Strohm 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

SECRETARY OF STATE
STATE CAPITOL
530 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: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
ZIP + 4 _____
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 _____
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 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)

(Title)

STATE OF _____ ss
COUNTY OF _____

On this the ____ day of _____, 20____, before me, _____
personally appeared _____, known to me, or proved to me,
to be the _____ 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 _____

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)

2003

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$30 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

FILE DATE 7-14-03
RECEIPT NO RECEIVED
1227170
JUL 14 '03

1. Corporate Name, Registered Agent and Registered Address:



DB-031918 JUL/2002
CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F.
1555 RAND ROAD
PO BOX 9698
RAPID CITY SD 57709-9698

Telephone # (605) 348-7879
FAX # (605) 348-8382
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.

S.D. SEC. OF STATE

ATTENTION - FILING INSTRUCTIONS

if ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report below in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The character of the business in which it is actually engaged in South Dakota

3. The names and addresses of its directors and officers:

Table with columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows for President, Vice President, Secretary, Treasurer.

SD law requires at least one director.

Do the above listed officers serve also as directors? YES NO If no, list directors below.

Director
Director

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ (Money received for issued shares)

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

Dated 7-11-03

By Robert F. Corner (Signature)
Its President (Title)

STATE OF South Dakota
COUNTY OF Pennington ss

On this the 11th day of July, 2003, before me, Marie J. Strahm, personally appeared Robert F. Corner, known to me, or proved to me, to be the President 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 March 7, 2006

Marie J. Strahm
Notary Public

(Notarial Seal)

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

SOS CRP 07/03

SECRETARY OF STATE
STATE CAPITOL
600 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: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____

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 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) _____

(Title) _____

STATE OF _____ as
COUNTY OF _____

On this the ____ day of _____, 20____, before me, _____
personally appeared _____, known to me, or proved to me,
to be the _____ 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 _____ 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) _____

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

File Date _____
Receipt No. _____

FILING FEE: \$10 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 previous street address, or a statement that there is no street address, of its registered office _____
_____ ZIP + 4 _____
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 _____
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 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 any other officer.

Dated _____

(Signature)

(Title)

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)

2005

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

FILING FEE: \$30 MAKE CHECK PAYABLE TO SECRETARY OF STATE

RECEIVED
JUL 20 05
S.D. SEC. of STATE

FILE DATE 07/20/05
RECEIPT NO. 7459168
RECEIVED
JUL 12 '05
S.D. SEC. of STATE

1. Corporate Name, Registered Agent Name and Registered Address:



DB031918
DB031918 JUL/2004
CORNER (R.F.) CONSTRUCTION CORPORATION
CORNER, ROBERT F.
1555 RAND ROAD
PO BOX 9698
RAPID CITY SD 57709-9698

Telephone #

FAX #

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

ATTENTION - FILING INSTRUCTIONS

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the front side of this form.

[X] ALL OF THE INFORMATION REQUIRED ON THE ANNUAL REPORT IS IDENTICAL AS SET FORTH IN THE PRIOR REPORT.

2. The address of the principal office 1555 Rand Road

Table with 6 columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows include Robert F. Corner (President), Nancy Ericksen (Secretary), and Nancy Ericksen (Treasurer).

4. Provide a brief description of the nature of the business General Contractor

SD law requires at least one director. Do the above listed officers serve also as directors? YES [X] NO If no, list directors below.

Table for authorized shares with columns: NUMBER OF AUTHORIZED SHARES, CLASS, SERIES. Includes rows for 5000 Common and 100 Issued Common.

The statement may be signed by any authorized officer of the Corporation.

Dated 07/07/05

Signature of Robert F. Corner

Robert F. Corner
Printed Name

President
Title

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: \$10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Business Corporation Act, 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 street address, or a statement that there is no street address, of its current registered office _____
_____ ZIP + 4 _____
3. The new 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 _____
4. The name of its current registered agent is _____
5. The name of its new 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.

The statement may be signed by any authorized officer of the corporation.

Dated _____

Signature

Printed Name

Title

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)

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

File Date _____
Receipt No. _____

FILING FEE: \$10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Business Corporation Act, 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 street address, or a statement that there is no street address, of its current registered office _____
 _____ ZIP + 4 _____
3. The new 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 _____
4. The name of its current registered agent is _____
5. The name of its new 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.

The statement may be signed by any authorized officer of the corporation.

Dated _____

Signature

Printed Name

Title

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)

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

File Date _____
Receipt No. _____

FILING FEE: \$10 In addition to annual report fee

Pursuant to the provisions of the South Dakota Business Corporation Act, 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 street address, or a statement that there is no street address, of its current registered office _____

ZIP + 4 _____
3. The new 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 _____
4. The name of its current registered agent is _____
5. The name of its new 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.

The statement may be signed by any authorized officer of the corporation.

Dated _____

Signature

Printed Name

Title

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)

278 2913 07/25/2008

2008

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

ANNUAL REPORT DOMESTIC

Please Type or Print Clearly in Ink

FILING FEE: \$30 Make check payable to SECRETARY OF STATE

FILE DATE	7/18/08
RECEIPT NO	815403
RECEIVED	
JUL 18 2008	
S.D. SEC. OF STATE	

1. Corporate Name, Registered Agent Name and Address:



DB031918
 DB031918 JUL/2007
 R.F. CORNER CONSTRUCTION CORPORATION
 CORNER, ROBERT F.
 1555 RAND ROAD
 PO BOX 9698
 RAPID CITY SD 57709-9698

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

2. The address of the principal executive office in or out of the State of South Dakota.

1555 Rand Rd.	Rapid City	SD	57702
Street Address	City	State	ZIP+4
PO Box 9698	Rapid City	SD	57709
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent Robert F. Corner

1555 Rand Rd.	Rapid City	SD	57702
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
PO Box 9698	Rapid City	SD	57709
Mailing Address (Optional - Required to be a South Dakota Address)	City	State	ZIP+4

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	Robert F. Corner	1555 Rand Rd.	Rapid City	SD	57702
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Nancy Eriksen	1555 Rand Rd.	Rapid City	SD	57702
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Nancy Eriksen	1555 Rand Rd.	Rapid City	SD	57702
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

Dated July 3, 2008

Robert F. Corner
 (Signature of an authorized officer)
Robert F. Corner
 (Printed Name)
President
 (Title)

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____

The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number: _____

4. The address of the agent currently on file for this entity

Street Address (Required)	City	State	ZIP+4
---------------------------	------	-------	-------

Mailing Address (Optional)	City	State	ZIP+4
----------------------------	------	-------	-------

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

Mailing Address (Optional - Required to be a South Dakota Address)	City	State	ZIP+4
--	------	-------	-------

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

Dated _____

(Signature of an authorized officer)

(Printed Name)

(Title)

2009

ANNUAL REPORT DOMESTIC

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

Please Type or Print Clearly in Ink

FILING FEE: \$50 Make check payable to SECRETARY OF STATE

RECEIVED stamp with FILE DATE 08/03/09, RECEIPT NO 1936480, AUG 03 2009, S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB031918 JUL/2008

R.F. CORNER CONSTRUCTION CORPORATION
CORNER, ROBERT F.
PO BOX 9698
RAPID CITY SD 57709-9698

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

2. The address of the principal executive office in or out of the State of South Dakota.

1555 Rand Road Rapid City SD 57702
Street Address City State ZIP+4

P.O. Box 9698 Rapid City SD 57709
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent Robert F. Corner

1555 Rand Road Rapid City SD 57702
Street Address (Required to be a South Dakota Address) City State ZIP+4

P.O. Box 9698 Rapid City SD 57709
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

4. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

X Robert F. Corner 1555 Rand Road Rapid City, SD 57702
President Street Address City State ZIP+4

Vice President Street Address City State ZIP+4

Nancy Ericksen 1555 Rand Road Rapid City SD 57702
Secretary Street Address City State ZIP+4

Nancy Ericksen 1555 Rand Road Rapid City SD 57702
Treasurer Street Address City State ZIP+4

Director Street Address City State ZIP+4

Director Street Address City State ZIP+4

Dated July 23, 2009

Signature of an authorized officer

Robert F. Corner
(Printed Name)

President
(Title)

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____

The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number: _____

4. The address of the agent currently on file for this entity

Street Address (Required) City State ZIP+4

Mailing Address (Optional) City State ZIP+4

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address) City State ZIP+4

Mailing Address (Optional – Required to be a South Dakota Address) City State ZIP+4

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

Dated _____

(Signature of an authorized officer)

(Printed Name)

(Title)

2010

ANNUAL REPORT DOMESTIC

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

Please Type or Print Clearly in Ink

FILING FEE: \$50 Make check payable to SECRETARY OF STATE

FILE DATE 07/15/10
RECEIPT NO 2048460

RECEIVED

JUL 15 2010

S.D. SEC. OF STATE

Telephone #

FAX #

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

1. Corporate Name, Registered Agent Name and Address:



DB031918 JUL/2009

R.F. CORNER CONSTRUCTION CORPORATION
CORNER, ROBERT F.
PO BOX 9698
RAPID CITY SD 57709-9698

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

3. The address of the principal executive office in or out of the State of South Dakota.

1555 Rand Rd. Rapid City SD 57702
Street Address City State ZIP+4
PO Box 9698 Rapid City SD 57709
Mailing Address (Optional) City State ZIP+4

4. The name of the South Dakota Registered Agent Robert F. Corner

1555 Rand Rd. Rapid City SD 57702
Street Address (Required to be a South Dakota Address) City State ZIP+4
PO Box 9698 Rapid City SD 57709
Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

5. The names and business addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

[X] Robert F. Corner 1555 Rand Rd. Rapid City SD 57702
President Street Address City State ZIP+4
[] Vice President Street Address City State ZIP+4
[X] Nancy Ericksen 1555 Rand Rd. Rapid City SD 57702
Secretary Street Address City State ZIP+4
[X] Nancy Ericksen 1555 Rand Rd. Rapid City SD 57702
Treasurer Street Address City State ZIP+4
[] Director Street Address City State ZIP+4
[] Director Street Address City State ZIP+4

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated July 1, 2010

Robert F. Corner
(Signature of an Authorized Person)

Robert F. Corner
(Printed Name)

308 1292

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____

The name of the successor registered agent _____

3. If listing a Commercial Registered Agent, please state their identification number _____

4. The address of the agent currently on file for this entity

Street Address (Required) City State ZIP+4

Mailing Address (Optional) City State ZIP+4

5. If the address has changed, its new address

Street Address (Required to be a South Dakota Address) City State ZIP+4

Mailing Address (Optional - Required to be a South Dakota Address) City State ZIP+4

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

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated _____

(Signature of an Authorized Person)

(Printed Name)

321 3324 07/19/2011

2011

ANNUAL REPORT DOMESTIC

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

Please Type or Print Clearly in Ink

FILING FEE: \$50 Make check payable to SECRETARY OF STATE

FILE DATE 6/14/11
RECEIPT NO 2165312
RECEIVED
JUN 14 2011
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB031918 JUL/2010
R.F. CORNER CONSTRUCTION CORPORATION
CORNER, ROBERT F.
PO BOX 9698
RAPID CITY SD 57709-9698

Telephone #

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

3. The address of the principal executive office in or out of the State of South Dakota.

1555 RAND ROAD RAPID CITY SD 57702
Street Address City State ZIP+4
P.O. Box 9698 RAPID CITY SD 57709
Mailing Address City State ZIP+4
Email Address

4. The name of the South Dakota Registered Agent ROBERT F. CORNER

1555 RAND ROAD RAPID CITY SD 57702
Street Address or Rural Route Box Number in This State and City State ZIP+4
P.O. Box 9698 RAPID CITY SD 57709
Mailing Address in This State, if Different from Street Address City State ZIP+4
Email Address

5. The names and addresses of its principal officers and directors. Please place a check mark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

Robert F. Corner 1555 RAND ROAD RAPID CITY SD 57702
President Street Address City State ZIP+4
Nancy Erickson 1555 RAND ROAD RAPID CITY SD 57702
Secretary Street Address City State ZIP+4
Nancy Erickson 1555 RAND ROAD RAPID CITY SD 57702
Treasurer Street Address City State ZIP+4
Director Street Address City State ZIP+4
Director Street Address City State ZIP+4

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated JUNE 13, 2011

Robert F. Corner
(Signature of an Authorized Person)

Email

ROBERT F. CORNER
(Printed Name)

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

Please Type or Print Clearly in Ink

FILING FEE: \$10 Make check payable to SECRETARY OF STATE

The undersigned entity submits the following statement for purpose of changing its registered office and/or its registered agent in the State of South Dakota.

1. The name of the entity _____

2. The name of the registered agent on file _____
(Old Registered Agent)

The name of the successor registered agent _____
(New Registered Agent)

3. If listing a Commercial Registered Agent, please state their identification number _____

4. The address of the agent currently on file for this entity (Old Registered Agent Address)

Street Address (Required) _____ City _____ State _____ ZIP+4 _____

Mailing Address _____ City _____ State _____ ZIP+4 _____

5. If the address has changed, list the new registered agent address

Street Address or Rural Route Box Number in This State and _____ City _____ State _____ ZIP+4 _____

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

Email Address _____

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

No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated _____

(Signature of an Authorized Person)

Email _____

(Printed Name)

2012

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

FILE 7/12/2012

RECEIPT NO 51980

1. Corporate ID and Name:

DB031918
R.F. CORNER CONSTRUCTION CORPORATION
1555 RAND RD
RAPID CITY, SD 57702

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

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

1555 RAND RD	RAPID CITY	SD	57702
Street Address	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROBERT F. CORNER

1555 RAND ROAD	RAPID CITY	SD	57709-9698
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	ROBERT F. CORNER	P.O. BOX 9698	RAPID CITY	SD	57709
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Date 07/12/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

ROBERT F. CORNER

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

FILE 7/30/2013

RECEIPT NO 131622

1. Corporate ID and Name:

DB031918
R.F. CORNER CONSTRUCTION CORPORATION
1555 RAND RD
RAPID CITY, SD 57702

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

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

1555 RAND RD	RAPID CITY	SD	57702
Street Address	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROBERT F. CORNER

1555 RAND ROAD	RAPID CITY	SD	57709-9698
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	ROBERT F. CORNER	P.O. BOX 9698	RAPID CITY	SD	57709
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.
By signing this form you agree to have both the fee and the form processed electronically.

Date 07/30/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

ROBERT F CORNER

(Printed Name)

2014

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC

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FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

FILE DATE 7/8/2014

RECEIPT NO 215054

1. Corporate ID and Name:

DB031918
R.F. CORNER CONSTRUCTION CORPORATION
1555 RAND RD
RAPID CITY, SD 57702

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

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

1555 RAND RD	RAPID CITY	SD	57702
Street Address	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROBERT F. CORNER

1555 RAND ROAD	RAPID CITY	SD	57709-9698
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and addresses of its principal officers and directors. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	ROBERT F. CORNER	P.O. BOX 9698	RAPID CITY	SD	57709
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

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By signing this form you agree to have both the fee and the form processed electronically.

Dated 07/08/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

ROBERT F CORNER

(Printed Name)

2015

ANNUAL REPORT

FILE DATE 7/8/2015

Enter Filing Year

DOMESTIC

RECEIPT NO 317548

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

SDCL 47-27-18, 59-11-24

Please Type or Print Clearly In Ink

FILING FEE: \$50.00 Make check payable to SECRETARY OF STATE

1. Corporate ID and Name:

DB031918

R.F. CORNER CONSTRUCTION CORPORATION

Telephone # _____

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

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

1555 RAND RD	RAPID CITY	SD	57702
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address, if Different from Street Address	City	State	ZIP+4
robcc@enetis.net			
Email Address (Optional)			

4. The name of the South Dakota Registered Agent

Agent Name: ROBERT F. CORNER

1555 RAND ROAD	RAPID CITY	SD	57709-9698
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
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. Please place a checkmark next to the name if the principal officer serves as a director. South Dakota Law requires at least one director.

<input checked="" type="checkbox"/>	ROBERT F. CORNER	P.O. BOX 9698	RAPID CITY	SD	57709
	President	Actual Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Vice President	Actual Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Secretary	Actual Street Address	City	State	ZIP+4
<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Treasurer	Actual Street Address	City	State	ZIP+4

Director

Actual Street Address

City

State

ZIP+4

Director

Actual Street Address

City

State

ZIP+4

No person may execute this report knowing it is false in any material aspect. Any violation is subject to a civil penalty.

Dated

Email _____

(Optional)

Signature Accepted Electronically _____

(Signature of an Authorized Person)

ROBERT F. CORNER _____

(Printed Name)

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A fee of up to \$40 will be assessed for returned payments.

7/8/2015 10:46:15 AM

2016

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

ANNUAL REPORT
 DOMESTIC CORPORATION

SDCL 59-11-24, 24.1

Please Type or Print Clearly In Ink

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FILE DATE 6/22/2016

RECEIPT NO 429137

1. Corporate ID and Name:

DB031918

Enter Corporate ID

R.F. CORNER CONSTRUCTION CORPORATION

Enter Corporate Name

2. The jurisdiction under whose law it is formed SOUTH DAKOTA

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

1555 RAND RD	RAPID CITY	SD	57702
Actual Street Address or Rural Route Box Number	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address, if Different from Street Address	City	State	ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: ROBERT F. CORNER

1555 RAND ROAD	RAPID CITY	SD	57709-9698
Actual Street Address or Rural Route Box Number in This State	City	State	ZIP+4
PO BOX 9698	RAPID CITY	SD	57709-9698
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

5. The names and business addresses of its principal officers and directors (governors). If, pursuant to SDCL 47-1A-732(1), the board of directors has been eliminated, list the names of the shareholders.

<input checked="" type="checkbox"/>	ROBERT F. CORNER	P.O. BOX 9698	RAPID CITY	SD	57709
	President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>					
	Vice President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Secretary	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	NANCY B. ERICKSEN	P.O. BOX 9698	RAPID CITY	SD	57709
	Treasurer	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>					
	Director	Actual Street Address	City	State	ZIP+4



Director

Actual Street Address

City

State

ZIP+4

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

Dated

Signature Accepted Electronically

(Signature of an Authorized Person)

ROBERT CORNER

(Printed Name)

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6/22/2016 4:26:09 PM