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# ANNUAL REPORT

Domestic Business Corporation  
SDCL 59-11-24, 24.1

Secretary of State  
500 E. Capitol Ave  
Pierre, SD 57501-5070  
(605) 773-4845

**2021**  
FILING YEAR

Please Type or Print Clearly in Ink  
Please submit one Original  
Make payable to the SECRETARY OF STATE

Filing Fee: \$50

Total Fee: \$50

1. Business ID and Name:

**DB004778**  
BUSINESS ID

**FARMERS ELEVATOR COMPANY OF MISSION HILL SOUTH DAKOTA**  
BUSINESS NAME

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

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

Actual Street Address

**200 S WASHINGTON AVE**  
**MISSION HILL, SD 57046**

Mailing Address

**PO BOX 87**  
**MISSION HILL, SD 57046-0087**

4. The South Dakota Registered Agent's Name:

South Dakota law permits the registered agent to be either (a) a noncommercial registered agent, (b) a commercial registered agent, or (c) an office holder.

(a) The South Dakota Noncommercial Registered Agent's name

Name **JAY CUTTS**

Actual Street Address in this State

**220 S WASHINGTON AVE**  
**MISSION HILL, SD 57046-0087**

Mailing Address in this State

**PO BOX 87**  
**MISSION HILL, SD 57046-0087**

5. The names and business addresses of its principal officers.

Title	Name	Address
<b>President</b>	<b>JAY F CUTTS</b>	<b>44681 309TH ST, MISSION HILL, SD, 57046</b>
<b>Vice President</b>	<b>KARL SCHENK</b>	<b>42555 308 TH ST, MISSION HILL, SD, 57046</b>
<b>Secretary</b>	<b>LEANNE CUTTS</b>	<b>44681 309TH ST, MISSION HILL, SD, 57046</b>

6. The names and business addresses of its directors (governors).

Name	Address
<b>SCOTT OLSON</b>	<b>44209 308TH ST, MISSION HILL, SD, 57046</b>

7. Beneficial Owners (optional): A beneficial owner is a person who has or in some manner controls an equity security. Please consult an attorney for legal advice if you have any questions concerning this entry. Any question under this heading is considered a request for legal advice and the secretary of state's office is, by statute, not permitted, to provide legal advice.



09/30/2021

Dated

Email (Optional)

*JAY FRANKLIN CUTTS*

Signature of an Authorized Person

JAY FRANKLIN CUTTS

Printed Name

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