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# ANNUAL REPORT

Domestic Business Corporation  
SDCL 59-11-24, 24.1

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

**2017**  
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:

**DB044324**  
BUSINESS ID

**SCOTT LONGHENRY CONSTRUCTION, INC.**  
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

**48082 252ND STREET  
GARRETSON, SD 57030**

Mailing Address, if Different from Street Address

**48082 252ND STREET  
GARRETSON, SD 57030**

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 **SCOTT R. LONGHENRY**

Actual Street Address in this State

**48082 252 STREET  
GARRESTON, SD 57030-6004**

Mailing Address in this State, if Different from Street Address

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

Name	Address
<b>SCOTT R LONGHENRY</b>	<b>48082 252ND ST, GARRETSON, SD, 57030</b>
<b>NANCY LONGHENRY</b>	<b>48082 252ND ST, GARRETSON, SD, 57030</b>

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

Name	Address
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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.

No person may execute this report knowing it is false in any material respect. Any violation may be subject to a civil and/or criminal penalty (SDCL 47-1A-129; 22-39-36).

B0033-0246 05/30/2017 12:23PM Rec'd by SD SOS



05/30/2017

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Email (Optional)

*Nancy Longhenry*

\_\_\_\_\_  
Signature of an Authorized Person

**Nancy Longhenry**

\_\_\_\_\_  
Printed Name

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