

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

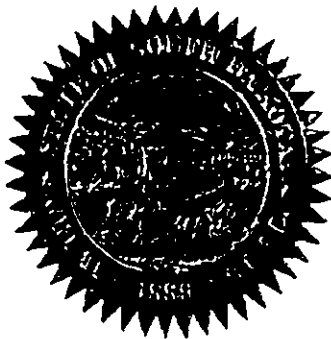
CERTIFICATE OF INCORPORATION

BUSINESS CORPORATION

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of SLATTERY BROS., INC. duly signed and verified, pursuant to the provisions of the South Dakota Business Corporation Act, have been received in this office and are found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issued this Certificate of Incorporation and attach hereto a duplicate of the Articles of Incorporation of SLATTERY BROS., INC.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this November 28, 1994.




JOYCE HAZELTINE
Secretary of State

6002323

Filed this 28th day of Nov 1994

9 4 1 2 5 7 8 0 0 4 RECEIVED

NOV 28 1994

Secretary of State

ARTICLES OF INCORPORATION
OF
SLATTERY BROS., INC.

Executed by the undersigned for the purpose of forming a business corporation under the South Dakota Business Corporation Act.

ARTICLE I.

The name of the corporation is Slattery Bros., Inc.

ARTICLE II.

The period of the corporation's duration is perpetual.

ARTICLE III.

The purpose for which the corporation is organized is to engage in agricultural operations, including, but not limited to, planting, cultivating, and harvesting crops; raising livestock; owning, leasing, holding or otherwise controlling agricultural land to be used in the business of agriculture in accordance with the South Dakota Family Farm Act of 1974; and to engage in all other lawful business.

ARTICLE IV.

The corporation shall have authority to issue 10,000 shares of common stock with a par value of One Hundred and no/100 Dollars (\$100.00) per share.

ARTICLE V.

The corporation will not commence business until consideration of at least One Thousand and no/100 Dollars (\$1,000.00) has been received for the issuance of shares.

ARTICLE VI.

The address of its initial registered office is HWC 3, Box 9, Martin, South Dakota 57551 and the name of its initial registered agent at such address is John M. Slattery.

ARTICLE VII.

The number of directors constituting the initial board of directors is two (2) and the names and addresses of the persons who are to serve as the initial directors are:

John M. Slattery
HWC 3, Box 9
Martin, SD 57551

Constance G. Slattery
HWC 3, Box 9
Martin, SD 57551

Receipt No.: 426 336 9 4 1 2 2 3 7 0 0 3 4

File Number: DB035025

ART OF INC

For

SLATTERY BROS., INC.

File at the request of:

PAUL M SEDLACEK
PO BOX 1228
RAPID CITY SD 57709

STATE OF SOUTH DAKOTA

OFFICE OF THE SECRETARY OF STATE

SS.

Filed in the office of Secretary of State on

Date November 28, 1994

Joyce Hazeltine
Secretary of State

Fee Recieved \$100 10,000 CM @ \$100.

SOS CRP 491 10/93

UN 4 77220009 X

C. J. W. F. G. R. E.

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

FARM

CERTIFICATE OF AUTHORIZATION

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that the report for SLATTERY BROS., INC. required by SDCL 47-9A-16 and 47-9A-17 of the Family Farm Act of 1974 has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I hereby issued this Farm Certificate of Authorization to SLATTERY BROS., INC.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this February 21, 1996.

Joyce Hazeltine
JOYCE HAZELTINE
Secretary of State

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

QUALIFICATION
FOR FAMILY FARM CORPORATION
AND AUTHORIZED FARM CORPORATION

No Filing Fee

RECEIVED

FEB 27 1996

SECRETARY OF STATE

Pursuant to the provisions of the Family Farm Act of 1974, SDCL 47-9A the following report is filed in order to qualify to engage in farming as defined under the terms of said Act

1. The name of the corporation is SLATTERY BROS., INC.
2. The state of its incorporation is South Dakota
3. The address of the registered office and the name of the registered agent in South Dakota is John M. Slattery, HC 5, Box 109, Martin, SD Zip+4 57551-9418
4. If a foreign corporation, the address of its principal office or registered office in its state of incorporation is N/A Zip+4 _____
5. List 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 and used for the growing of crops or the keeping or feeding of poultry or livestock:

See attached Exhibit "A"

6. The names and addresses of the officers and the board of directors (Both officers and directors are to be listed even though they may be the same.)
- President Jeffrey P. Slattery, HC 5, Box 109, Martin, SD 57551-9418
- Vice President Paul L. Slattery, P.O. Box 104, Martin, SD 57551
- Secretary Constance G. Slattery, HC 5, Box 109, Martin, SD 57551-9418
- Treasurer Constance G. Slattery, HC 5, Box 109, Martin, SD 57551-9418
- Director John M. Slattery, HC 5, Box 109, Martin, SD 57551-9418
- Director Constance G. Slattery, HC 5, Box 109, Martin, SD 57551-9418
- Director Paul L. Slattery, P.O. Box 104, Martin, SD 57551

7. Please check which applies to this corporation.

FAMILY FARM CORPORATION AUTHORIZED FARM CORPORATION _____

- (A) Applies to a FAMILY FARM CORPORATION. (SDCL 47-9A-14) The number of shares owned by person(s) residing on the farm or actively engaged in farming or their relatives within the third degree of kindred, or who has resided on or has actively operated the farm is 5,000. Degree of kindred is defined as the number of generations with each generation being a degree (SDCL 29-1-10).

OR

The number of shares owned by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is _____.

- (B) Applies only to AUTHORIZED FARM CORPORATION. (SDCL 47-9A-15) The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____ % (Must not exceed 20% of its gross receipts).

(C) The name, address and number of shares owned by each shareholder:

Name	Address	Degree of Kindred	Number of Shares
John M. Slattery	HC 5, Box 109, Martin, SD 57551	1st	2,150
Constance G. Slattery	HC 5, Box 109, Martin, SD 57551	1st	2,150
Paul L. Slattery	P.O. Box 104, Martin, SD 57551	2nd	350
Jeffrey P. Slattery	HC 5, Box 109, Martin, SD 57551	2nd	350
		(Total)	5,000

Dated 2-18 1996

Corporation SLATTERY BROS., INC.
Signature Constance G. Slattery
Title of Officer Secretary/Treasurer

STATE OF SOUTH DAKOTA
COUNTY OF PENNINGTON ss

I, Paul M. Sedlacek a notary public, hereby certify that on the _____ day of February, 19 96 personally appeared before me Constance G. Slattery who being by me first duly sworn, declared that she/he is the Secretary/Treasurer of Slattery Bros., Inc. that she/he signed the foregoing document as officer of the corporation, and that the statements there in contained are true.

My Commission Expires _____ Notary Public Paul M. Sedlacek

Notarial Seal

9:022740075
2/21/96

EXHIBIT "A"

Attached to Qualification for Family Farm Corporation and Authorized Farm Corporation Report of Slattery Bros., Inc., a South Dakota corporation, filed with the Office of the South Dakota Secretary of State in accordance with the provisions of the Family Farm Act of 1974, SDCL 47-9A.

5. List 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 and used for the growing of crops or the keeping or feeding of poultry or livestock:

T37N, R36W 6th P.M., Bennett Co., SD

Sec. 16: E1/2
Sec. 20: SW1/4
Sec. 21: E1/2 and NW1/4
Sec. 28: NE1/4 and S1/2
Sec. 29: NE1/4 and SW1/4
Sec. 32: All, except Lot A
Sec. 34: W1/2

T36N, R37W 6th P.M., Bennett Co., SD

Sec. 25: S1/2SE1/4
Sec. 33: All
Sec. 34: All
Sec. 35: All
Sec. 36: All

T36N, R36W 6th P.M., Bennett Co., SD

Sec. 4: SW1/4
Sec. 5: SE1/4
Sec. 7: NE1/4
Sec. 9: N1/2NW1/4
Sec. 32: S1/2

T35N, R37W 6th P.M., Bennett Co., SD

Sec. 1: All
Sec. 2: All
Sec. 3: N1/2SW1/4 and W1/2SE1/4
Sec. 11: NW1/4

T35N, R36W 6th P.M., Bennett Co., SD

Sec. 6: All

containing approximately 8,480 acres.

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 12-26-95
 RECEIPT NO. 572905
 RECEIVED
 NOV 29 1995
 RECEIVED
 DEC 12 1995
 S.D. SEC. OF STATE
 S.D. SEC. OF STATE - 6408

1. Corporate Name, Registered Agent and Registered Address:

DB-035025 NOV/00
 SLATTERY BROS., INC.
 SLATTERY, JOHN M.
 HMC 3, BOX 9
 MARTIN, SD 57551-0009

Telephone # 605-773-6408
 FAX # _____
 Federal Taxpayer ID _____
 FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day 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 address, 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 Family Farm + Ranch

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>Paul Slattery</u>	Director	<u>Box 104</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>John Slattery</u>	Director	<u>NCS, Box 109</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Jeffrey P. Slattery</u>	President	<u>NCS, Box 109</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Paul L. Slattery</u>	Vice President	<u>Box 104</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Constance Slattery</u>	Secretary	<u>NCS, Box 109</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Constance Slattery</u>	Treasurer	<u>NCS, Box 109</u>	<u>Martin</u>	<u>SD</u>	<u>57551</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 10,000 CLASS Common SERIES _____ PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE 100.00 per share

5. NUMBER OF SHARES ISSUED 5,000 CLASS Common SERIES _____ 100.00 per share

6. The amount of its stated capital is \$ 500,000.00

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 11-26-95 19 95

By [Signature]
 (Signature)
 Its President Slattery Brothers
 (Title)

STATE OF South Dakota
 COUNTY OF Dennett

I, Nancy Storkel a notary public, do hereby certify that on this 22nd day of December 19 95, personally appeared before me John Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Bros Inc.

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
 My Commission Expires 10-17-99
[Signature]
 Notary Public

(Notarial Seal)

SECRETARY OF STATE
STATE CAPITOL
600 E. CAPITOL
PIERRE, S.D. 57501-6077
605-773-4845

POSTAL CHANGE

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 Slattery Brothers, Inc.
- The previous street address, or a statement that there is no street address, of its registered office NC 3, Box 9, Martin, S.D. ZIP + 4 57551
- The street address, or a statement that there is no street address, to which the registered office is to be changed is NC 5, Box 109, Martin, S.D. ZIP + 4 57551
- The name of its previous registered agent is John M. Slattery
- The name of its successor registered agent is same - John M. Slattery
* 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 12-11 1995

Slattery Brothers, Inc.
Constance Slattery
(signature)
Sec. Treasurer
(title)

STATE OF SOUTH DAKOTA
COUNTY OF BENNETT ss

I, Luella Cozad, a notary public, do hereby certify that on this 11th day of December 1995, personally appeared before me Constance Slattery who, being by me first duly sworn, declared that he/she is the Secretary of Slattery Brothers, Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 3/11/2001

Luella Cozad
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)

* K 1 9 2 0 1 0 1 1 4 2 4 4 1 1

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

FILE DATE 1-9-97
RECEIPT NO. 5917

RECEIVED
JAN 09 1997
STATE OF SOUTH DAKOTA

1 Corporate Name, Registered Agent and Registered Address

DF-035025	NOV/95
SLATTERY BROS., INC.	
SLATTERY, JOHN M.	
HC 5 BOX 109	
MARTIN, SD 57551-9801	

Telephone # 605-685-6408
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 12/20 1996
By Jeff Slattery (Signature)
Its Pres (Title)

STATE OF SOUTH DAKOTA
COUNTY OF BENNETT ss

I, Luella Cozad, a notary public, do hereby certify that on this 20th day of December 1996, personally appeared before me Jeff Slattery aka Jeffrey P. Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Brothers, Inc.

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
My Commission Expires _____
(Notarial Seal) Luella Cozad Notary Public

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

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

File Date: _____
Receipt No _____

FILING FEE: \$5 In addition to annual report fee

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

1. The name of the corporation is _____

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 out 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)

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

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 1-9-97
 FILE NO. 395917
 RECEIVED
 JAN 09 1997
 S.D. SEC. OF STATE

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

- The name of the corporation is Slattery Brothers Inc.
 The state of incorporation is South Dakota
- The name of the registered agent in South Dakota and the registered office address is John M. Slattery
NC 5, Box 109, Martin, SD Zip +4 57551-9801
- If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____
- 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

- List only the changes of the names or addresses of the officers and directors

NAME	REPLACED	AS OFFICER OR DIRECTOR
_____	_____	_____

- 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 5000
 (Degree of kindred is defined as number of generations with each generation being a degree) #6 applies only to FAMILY FARM CORPORATIONS

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

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
<u>John M. Slattery</u>	<u>NC 5 Box 109 Martin</u>	<u>2150</u>	<u>1st</u>
<u>Constance G. Slattery</u>	<u>105 Box 109 Martin</u>	<u>2150</u>	<u>1st</u>
<u>Jeffrey P. Slattery</u>	<u>105 Box 109 Martin</u>	<u>350</u>	<u>2nd</u>
<u>Paul H. Slattery</u>	<u>Box 104 Martin</u>	<u>350</u>	<u>2nd</u>

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

Dated 12/20 1996 By Jeff Slattery
 (Signature) Pres.
 (Title)

STATE OF SOUTH DAKOTA
 COUNTY OF BENNETT ss

I, Luella Cozad, a notary public, do hereby certify that on this 20th day of December 1996, personally appeared before me Jeff Slattery aka Jeffrey P. Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Brothers, Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true

My Commission Expires _____

Luella Cozad
 Notary Public

(Notary 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**

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)

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

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 12-15-97
 FILE NO. 674114

RECEIVED
 DEC 15 1997
 S.D. SEC. OF STATE

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

- The name of the corporation is Slattery Bros. Inc.
 The state of incorporation is South Dakota
- The name of the registered agent in South Dakota and the registered office address is John M. Slattery
NE5, Box 109 Martin, S.D. Zip + 4 57551
- 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.

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

NAME	REPLACED	AS OFFICER OR DIRECTOR

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 5000
 (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
John M. Slattery	NE5 Box 109 Martin SD	2090	1st
Constance G. Slattery	NE5 Box 109 Martin SD	2090	1st
Jeffrey P. Slattery	NE5 Box 109	410	2nd
Paul H. Slattery	Box 109	410	2nd

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 _____ 19 _____

By [Signature]
 (Signature)
 its President
 (Title)

STATE OF _____
 COUNTY OF _____ ss

I, Brian K. K., a notary public, do hereby certify that on this 14th day of December 19 97, personally appeared before me John Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Bros. Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true

My Commission Expires Aug 12, 2002

[Signature]
 Notary Public

(Notarial Seal)

SOS CRP 410 10/92

REGISTRATION

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

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

FILE DATE 12-22-98
RECEIPT NO. 961988

RECEIVED

DEC 22 1998

1. Corporate Name, Registered Agent and Registered Address:

DF-035025 NOV/97
SLATTERY BROS., INC.
SLATTERY, JOHN M.
HC 5 BOX 109
MARTIN, SD 57551-9801

Telephone # _____
FAX # _____
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.

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 12-11-98 19__

By John M. Slattery
(Signature)
Its Pres.
(Title)

STATE OF South Dakota
COUNTY OF Beauregard

I, Nancy Storkel, a notary public, do hereby certify that on this 11th day of December 1998, personally appeared before me John M. Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Brothers Inc.

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

My Commission Expires 10-17-99

Nancy Storkel
Notary Public

(Notarial Seal)

SOS CRP 6/97

SECRETARY OF STATE
STATE CAPITOL
600 E. CAPITOL
PIERRE, S.D. 57501-5070
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)

* K 998

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

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 _____
FILE NO. _____

RECEIVED
DEC 22 1998
S.D. SEC. OF STATE

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

- The name of the corporation is Slattery Brothers Inc.
The state of incorporation is South Dakota
- The name of the registered agent in South Dakota and the registered office address is John M. Slattery
HCS, Box 109 Martin SD. Zip + 4 57551
- If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

- 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.
Acquire the following: Govt. lots 1, 2, 3, 4, 5 + 6 and the E 1/2 of the SW 1/4 and the SE 1/4 of Section 6 in Township 36 North of Range 36 West of the 6th Principal Meridian; + the SE 1/4 of Section 1 in Township 36 North of Range 37 West of the 6th Principal Meridian.

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

NAME	REPLACED	AS OFFICER OR DIRECTOR

- 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 100%
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

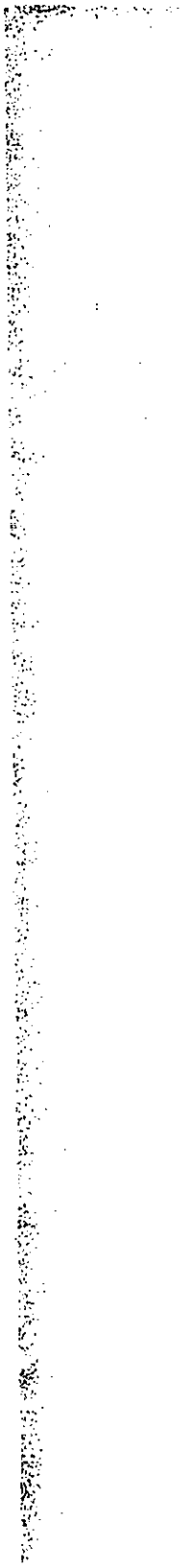
- List changes only of names, address and number of shares owned by shareholders

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
<u>Jeff Slattery</u>	<u>HCS - Box 109</u>	<u>510</u>	<u>2nd</u>
<u>Paul Slattery</u>	<u>Box 109 Martin SD</u>	<u>510</u>	<u>2nd</u>
<u>John Slattery</u>	<u>HCS, Box 109 Martin</u>	<u>1990</u>	<u>1st</u>
<u>Constance G Slattery</u>	<u>HCS, Box 109 Martin SD</u>	<u>1990</u>	<u>1st</u>

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

Dated 12-11-98 19____ By Jeff Slattery
(Signature)
Its Pres.
(Title)

STATE OF South Dakota
COUNTY OF Bonnet ss
I, Nancy Stichel, a notary public, do hereby certify that on this 11th day of December 1998, personally appeared before me Jeff Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Brothers Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true
My Commission Expires 10-17-99 Nancy Stichel
Notary Public



1999

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

FILE DATE 12-29-99
RECEIPT NO. 254326
RECEIVED

DEC 29 '99

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-035025 NOV/98
SLATTERY BROS., INC.
SLATTERY, JOHN M.
HC 5 BOX 109
MARTIN SD 57551-9801

Telephone # 605-685-6408

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 December 28 1999

By [Signature]
(Signature)

Its Pres. Slattery Bros.
(Title)

STATE OF South Dakota
COUNTY OF Bennett

I, Rebecca J Klaudt, a notary public, do hereby certify that on this 28 day of December 1999 personally appeared before me Jeff Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Brothers the corporation

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

My Commission Expires May 12, 2005

Rebecca J Klaudt
Notary Public

(Notarial Seal)

SOS CRP 608

SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-6077
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) _____

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

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 12-29-99
 FILE NO. _____
 RECEIVED
 DEC 29 '99
 S.D. SEC. OF STATE

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

- The name of the corporation is Slattery Brothers, Inc.
 The state of incorporation is South Dakota
- The name of the registered agent in South Dakota and the registered office address is John M. Slattery
NCS, Box 109 Martin, SD. Zip + 4 57551
- If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____
- 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.

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

NAME	REPLACED	AS OFFICER OR DIRECTOR
_____	_____	_____

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 100%
 (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
<u>John M. Slattery</u>	<u>NCS Box 109 Martin, SD.</u>	<u>1932</u>	<u>1st</u>
<u>Constantine Slattery</u>	<u>NCS Box 109 Martin, SD.</u>	<u>1932</u>	<u>1st</u>
<u>Jeffrey Slattery</u>	<u>NCS, Box 109</u>	<u>568</u>	<u>2nd</u>
<u>Rud Louis Slattery</u>	<u>Box 104 Martin, SD.</u>	<u>568</u>	<u>2nd</u>

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated December 28, 1999
 By John M. Slattery
 (Signature)
 His John M. Slattery, Pres.
 (Title)

STATE OF South Dakota
 COUNTY OF Beauregard ss

I, Rebecca J. Klaudt, a notary public, do hereby certify that on this 28 day of December 1999 personally appeared before me Jeff Slattery who, being by me first duly sworn, declared that he/she is the President of Slattery Brothers that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.
 My Commission Expires May 12, 2005

Rebecca J. Klaudt
 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**

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)

RETURN TO
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL
PIERRE, S.D. 57501-5077
605-773-4845
FAX (605) 773-4650

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 _____
FILE NO. _____
RECEIVED
DEC 27 '00
S.D. SEC. OF STATE

Pursuant to the provisions of SDCL 47-8A, the undersigned corporation hereby submits the following corporate farming annual report

- The name of the corporation is Slattery Brothers Incorporated
The state of incorporation is South Dakota
- The name of the registered agent in South Dakota and the registered office address is John M. Slattery
HC 5, Box 109 Martin, SD Zip + 4 57551-9418
- If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____
N/A
- 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

- List only the changes of the names or addresses of the officers and directors.
NAME REPLACED AS OFFICER OR DIRECTOR

- 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 5000
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

- List changes only of names, address and number of shares owned by shareholders
NAME ADDRESS NUMBER OF SHARES DEGREE OF KINDRED

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

Dated 12/26/00

By J.M. Slattery
(Signature)
Its Pres.
(Title)

STATE OF South Dakota
COUNTY OF Beauregard SS

On this the 26 day of December, 2000, before me, Kimberly J. Farner,
personally appeared John M. Slattery, 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 3/31/06

Kimberly J. Farner
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: \$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) _____

LONG

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

0201211 3516
ANNUAL FARM REPORT
PLEASE TYPE OR USE BLACK INK
NO FILING FEE

FILE DATE _____
RECEIPT NO. _____
RECEIVED
DEC 12 '01 NOV 30 '01
S.D. SEC. OF STATE

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

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 Slattery Bros Inc.

The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is John M. Slattery
HC 5, Box 109 Martin SD. 57551

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.

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

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 1000 (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
John M. Slattery	HC 5 Box 109 Martin SD 57551	1000	1st
Constance Slattery	HC 5 Box 109	800	1st
Jeffrey P. Slattery	HC 5 Box 109	800	2nd
Paul J. Slattery	HC 5 Box 109	200	2nd
Joseph J. Slattery	6508 Irving Blvd. G. Little, W. 5716	100	2nd
Jean M. Slattery	HC 5 Box 109 Martin SD	100	2nd
Lincoln Slattery	HC 5 Box 109	200	2nd

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0 % (Applies only to AUTHORIZED FARM CORPORATION)

Dated 11-28-01

STATE OF South Dakota
COUNTY OF Beauregard

On this the 28th day of November, 2001, before me,

personally appeared John Slattery, 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 Nov 17, 2003

(Notarial Seal)

[Signature]
(Signature)
President
(Title)
Brian Kirk
(Notary Public)

2002

ANNUAL REPORT

0303219.3613
3/20/03

2/7/03
FILE DATE RECEIVED
RECEIPT NO. 719115
DEC 1 10 02
S.D. SEC. OF STATE

RECEIVED

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

1. Corporate Name, Registered Agent and Registered Address:



DF-035025 NOV/2001
SLATTERY BROS., INC.
SLATTERY, JOHN M.
HC 5 BOX 109
MARTIN SD 57551-9801

S.D. SEC. OF STATE

Telephone # _____

FAX # _____

Federal Taxpayer ID _____

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

RECEIVED

*** 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 Farming + Ranching

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>Jeffrey P. Slattery</u>	President	<u>HC 5, Box 109</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Paul K. Slattery</u>	Vice President	<u>Box 104</u>	<u>"</u>	<u>"</u>	<u>"</u>
<u>Constance G. Slattery</u>	Secretary	<u>HC 5, Box 109</u>	<u>"</u>	<u>"</u>	<u>"</u>
<u>"</u>	Treasurer	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>

SD law requires at least one director.

Do the above listed officers serve also as directors? YES X 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
10,000 100.00 per share

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ 500,000.00 (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 12-18-02

By [Signature]
(Signature)
Its Pres.
(Title)

STATE OF South Dakota ss
COUNTY OF Beadell

On this the 18th day of December 2002, before me, Brian Kirk

personally appeared John Slattery, 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 Aug 12 2007

[Signature]
Notary Public

(Notarial Seal)

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/scs/sos.htm

SOS CRP 11/01

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)

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

ANNUAL FARM REPORT

PLEASE TYPE OR USE PREPARED FORM
 Filed pursuant to the provisions of S.D. Codified Laws § 41-9A

NO FILING FEE

FILE DATE RECEIVED

DEC 17 2002

S.D. SEC. OF STATE

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

RECEIVED

FEB 7 2003

S.D. SEC. OF STATE

1. Corporate name and address:



DF-035025 NOV/2001
 SLATTERY BROS., INC.
 SLATTERY, JOHN M.
 HC 5 BOX 109
 MARTIN SD 57551-9801

2. The state of incorporation is South Dakota
 3. The name of the registered agent in South Dakota and the registered office address is John M. Slattery
HC 5 Box 109 Martin SD 57551
 4. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is _____

5. 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.

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

NAME	REPLACED	AS OFFICER OR DIRECTOR

7. 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 _____ (Degree of kindred is defined as number of generations with each generation being a degree.) *7 applies only to FAMILY FARM CORPORATIONS

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

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
John M. Slattery	HC 5, Box 109 Martin SD	1447	1st
Constance G. Slattery	" " " "	1449	1st
Jeffrey P. Slattery	" " " "	204	and
Paula Slattery	Box 104 " " "	225	and
Joseph J. Slattery	6508 Irving Blvd Gillette WY 82401	176	and
Jean M. Slattery	HC 5, Box 106 Martin SD	176	and
Boyle M. Slattery	Box 104 " " "	22	and

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

Dated 12-18-02

STATE OF South Dakota
 COUNTY OF Bent

Jeff Slattery
 (Signature)
Pres.
 (Title)

On this the 18th day of December, 2002 before me, Brian Kirk
 personally appeared Jeff Slattery
 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.

August 12 2008
 My Commission Expires

Brian Kirk
 (Notary Public)

(Notarial Seal)

225 0946
SECRETARY OF STATE
STATE CAPITOL
500 E. CAPITOL AVE.
PIERRE, S.D. 57501
(605)773-4845
Fax (605)773-4550

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE _____

RECEIVED

DEC 30 09

1. Corporate name and address:



* DF - 035025 *
DF-035025 NOV/2002
SLATTERY BROS., INC.
SLATTERY, JOHN M.
HC 5 BOX 109
MARTIN SD 57551-9801

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

2. The state of incorporation is South Dakota

3. The name of the registered agent in South Dakota and the registered office address is John M. Slattery
HC 5, Box 109 Martin, SD. 57551

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

5. 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.

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

NAME	REPLACED	AS OFFICER OR DIRECTOR
------	----------	------------------------

7. 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 5000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

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

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

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

Dated 12-27-03

STATE OF South Dakota

COUNTY OF Bennett

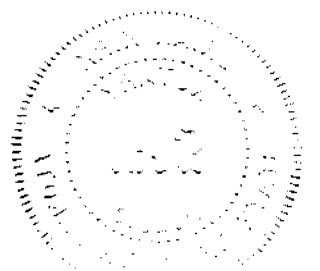
Jeffrey P Slattery
(Signature)
Prs.
(Title)

On this the 27th day of December, 2003, before me, ~~Jeffrey P Slattery~~ Brian Kirk, known to me, or proved to me, personally appeared Jeff Slattery, 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 Aug 12, 2008

(Notarial Seal)

[Signature]
(Notary Public)



**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

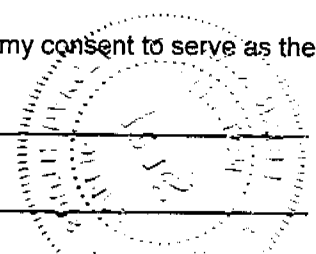
(Notarial Seal)

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)



**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)

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

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
 Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 01/03/05

RECEIVED

JAN 3 2005

S.D. SEC. OF STATE

232 3715

1. Corporate name and address:



* D F 0 3 5 0 2 5 *
 DF035025 NOV/2003
 SLATTERY BROS., INC.
 SLATTERY, JOHN M.
 HC 5 BOX 109
 MARTIN SD 57551-9801

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

2. The state of incorporation is South Dakota

3. The name of the registered agent in South Dakota and the registered office address is John M. Slattery
HC 5, Box 109 Martin, SD 57551

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

5. 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.

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

NAME	REPLACED	AS OFFICER OR DIRECTOR

7. 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 5000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

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

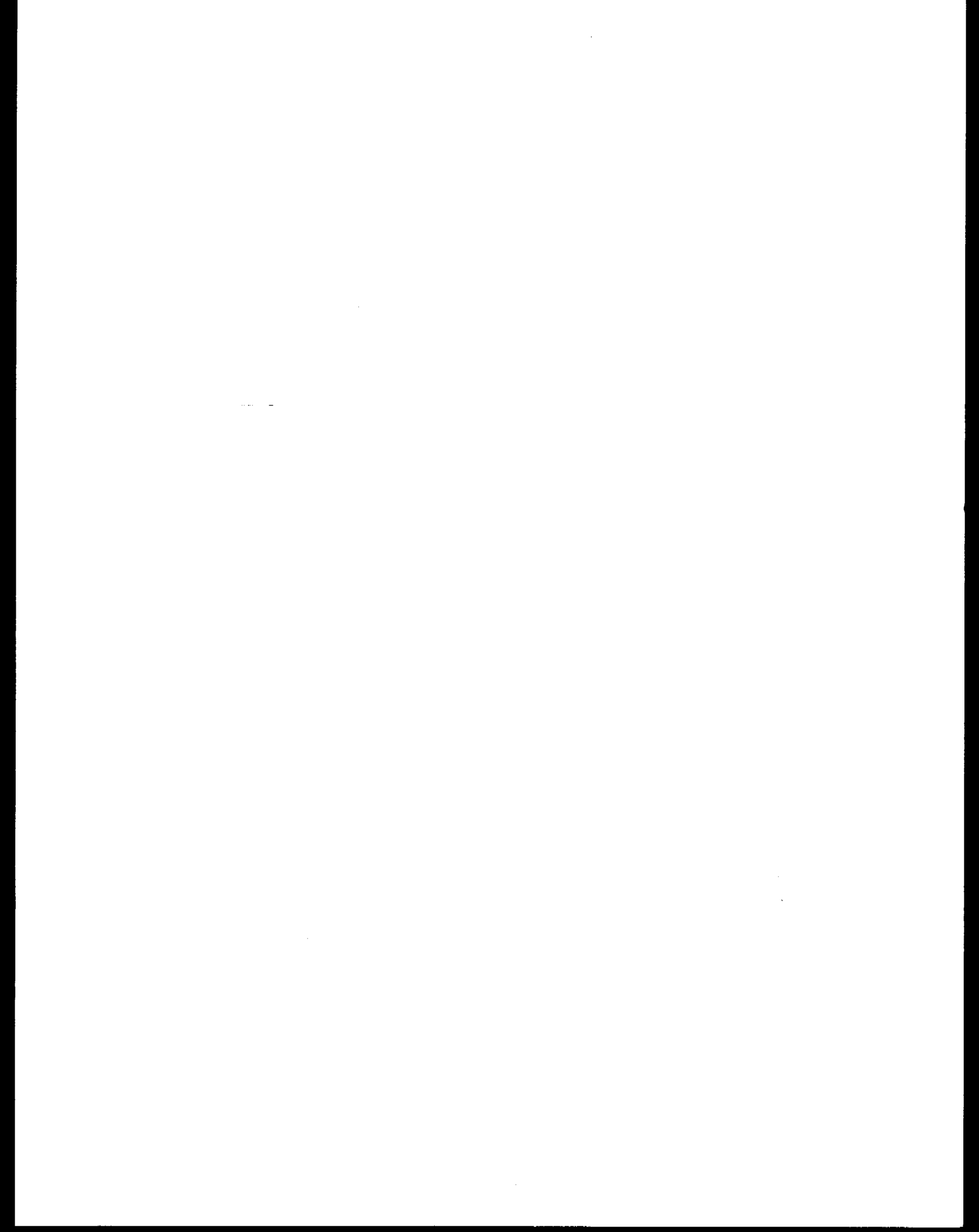
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
John M. Slattery	HC 5, Box 109 Martin, SD	1310	1st
Constance G. Slattery	HC 5, Box 109 Martin, SD 57551	1312	1st
Jeffrey P. Slattery	HC 5, Box 109 Martin, SD 57551	856	2nd
Paul L. Slattery	Box 104 Martin, SD 57551	825	2nd
Joseph J. Slattery	6508 Irving B. Gillette Way, 82716	226	2nd
Jean M. Slattery Kirk	HC 5, Box 106 Martin, SD 57551	226	2nd
Holly R. Boomer Slattery	HC 5, Box 108 Martin, SD 57551	164	2nd
Linnae R. Slattery	Box 104, Martin, SD 57551	81	2nd

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0% %.
 (Applies only to AUTHORIZED FARM CORPORATION)

Dated 12-28-04

[Signature]
 (Signature)

President
 (Title)



ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
 Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 12/27/05

RECEIVED

DEC 27 '05

S.D. SEC. OF STATE

1. Corporate name and address:



DF035025
 DF035025 NOV/2004
 SLATTERY BROS., INC.
 SLATTERY, JOHN M.
 HC 5 BOX 109
 MARTIN SD 57551-9801

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

2. The state of incorporation is South Dakota

3. The name of the registered agent in South Dakota and the registered office address is John M. Slattery
29432 225th Ave

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

5. 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.

Bought all of Section 11 and the SE 1/4 of section 10 all
in 36-37

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

NAME	ADDRESS	DEGREE OF KINDRED
John M. Slattery	29432 225 th Ave Martin SD 57551	AS OFFICER OR DIRECTOR
Constance G. Slattery	29432 225 th Ave " " "	
Jeffrey P. Slattery	22507 294 th St. " " "	

7. 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 5000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

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

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
John M. Slattery	29432 225 th Ave Martin SD 57551	1173	1st
Constance G. Slattery	29432 225 th Ave Martin SD " "	1174	1st
Jeffrey P. Slattery	22507 294 th St Martin SD " "	844	2nd
Paul L. Slattery	306 1st Ave Martin SD " "	844	2nd
Joseph J. Slattery	6503 Irving Blvd Gillette, WY 82716	276	2nd
John M. Slattery Kirk	29322 225 th Ave Martin SD 57551	276	2nd
Holly Rae Boomer Slattery	22507 294 Ave Martin SD 57551	276	2nd
Linnæe Ruth Slattery	306 1st Ave Martin SD 57551	137	2nd

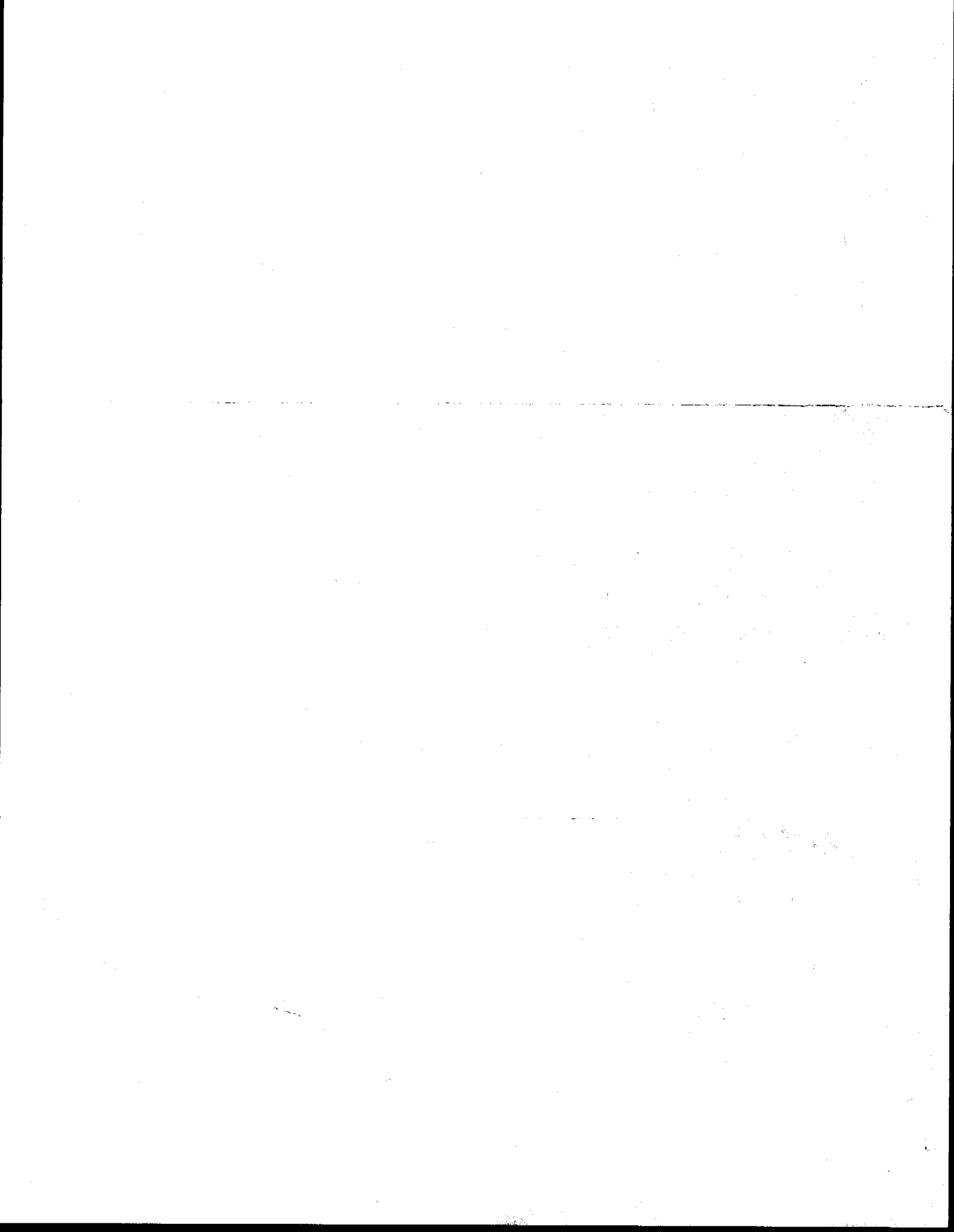
9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 12-1-05

John M. Slattery
 (Signature)

President
 (Title)

244 2259



244 2258 01/12/2006

2005

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 12/27/05
RECEIPT NO. 1509641
RECEIVED
DEC 27 '05
S.D. SEC. OF STATE

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



DF035025
DF035025 NOV/2004
SLATTERY BROS., INC.
SLATTERY, JOHN M.
HC 5 BOX 109
MARTIN SD 57551-9801

Telephone # 605-685-6408
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.

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 29432 225th Ave

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>Jeff Slattery</u>	President	<u>22507 294th Dr</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Paul Slattery</u>	Vice President	<u>Box 104-306th 1st Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Constance A. Slattery</u>	Secretary	<u>29432 225th Ave</u>	<u>"</u>	<u>"</u>	<u>57551</u>
<u>Constance G. Slattery</u>	Treasurer	<u>"</u>	<u>"</u>	<u>"</u>	<u>"</u>

4. Provide a brief description of the nature of the business Farming + Raising

SD law requires at least one director.

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

<u>John M. Slattery</u>	Director	<u>29432 225th Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Constance A. Slattery</u>	Director	<u>29432 225th Ave</u>	<u>"</u>	<u>"</u>	<u>"</u>
<u>Paul Slattery</u>		<u>306 1st Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>

5. The total number of authorized shares, itemized by class and series, if any, within each class:

NUMBER OF AUTHORIZED SHARES 5000 1000 CLASS SERIES

6. NUMBER OF ISSUED AND OUTSTANDING SHARES 5000 CLASS SERIES

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

Dated 12-1-05

Constance A. Slattery
Signature

Constance G. Slattery
Printed Name

Secretary - Treasurer
Title

RETURN TO: SECRETARY OF STATE, 500 E. CAPITOL, PIERRE, S.D. 57501-5077
PHONE: 605-773-4845
www.sdsos.gov

SOS CRP 07/05

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

File Date _____
Receipt No. _____

All Address Change

Registered Agent Didn't Change!
FILING FEE: \$10 in addition to annual report fee

*Just Address
Sorry I filled
this out without
reading
carefully.*

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.

- The name of the corporation is Slattery Brothers Inc.
- The street address, or a statement that there is no street address, of its current registered office was HCS, Box 109
29432 225th Ave Martin, SD ZIP + 4 57551
- 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.
29432 22th Ave Martin, SD ZIP + 4 57551
- The name of its current registered agent is John M. Slattery
- The name of its new registered agent is * same ↑

***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 12-1-05

Constance G. Slattery
Signature

Constance G. Slattery
Printed Name

Secretary-Treasurer
Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, John M. Slattery, hereby give my consent to serve as the
(name of registered agent)
registered agent for Slattery Brothers Incorporated
(corporate name)

Dated 12-1-05
(signature)

2006

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 12/29/06
RECEIPT NO. 628678

RECEIVED

DEC 29 2006

S.D. SEC. OF STATE

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



DF035025 NOV/2005
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 22ND AVE
MARTIN SD 57551-9801

Telephone # 605-685-6408
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.

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

3. The names and business addresses of its directors and principal 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. Provide a brief description of the nature of the business

5. The total number of authorized shares, itemized by class and series, if any, within each class:
NUMBER OF AUTHORIZED SHARES CLASS SERIES

6. NUMBER OF ISSUED SHARES CLASS SERIES

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

Dated 12-27-06

Signature: Jeff Slattery

Printed Name: Jeff Slattery

Title: President

**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)

257 0463 01/05/2007

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

ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 12/29/06

RECEIVED

DEC 29 2006

S.D. SEC. OF STATE

1. Corporate name and address:



DF035025 NOV/2005
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 ~~225th~~ AVE 225th Ave
MARTIN SD 57551-9801

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

2. The state of incorporation is

South Dakota

3. The name of the registered agent in South Dakota and the registered office address is

John M. Slattery

29432 225th Ave. Martin, SD. 57551

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

5. 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.

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

NAME

REPLACED

AS OFFICER OR DIRECTOR

7. 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 5000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

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

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
John M Slattery	29432 225th Ave Martin SD 57551	1173	1st
Constance G. Slattery	29432 225th Ave Martin SD 57551	1174	1st
Jeffrey P. Slattery	22507 29th St Martin SD 57551	964	2nd
Paul L. Slattery	Box 104 Martin SD 57551	895	2nd
Joseph J. Slattery	6508 Irving Blvd Gillette WY 82716	276	2nd
John M. Slattery Kirk	29322 225th Ave. Martin SD 57551	276	2nd
Holly R. Slattery	22507 29th St. Martin, SD 57551	156	2nd
Linnæe R. Slattery	Box 104 Martin, SD 57551	106	2nd

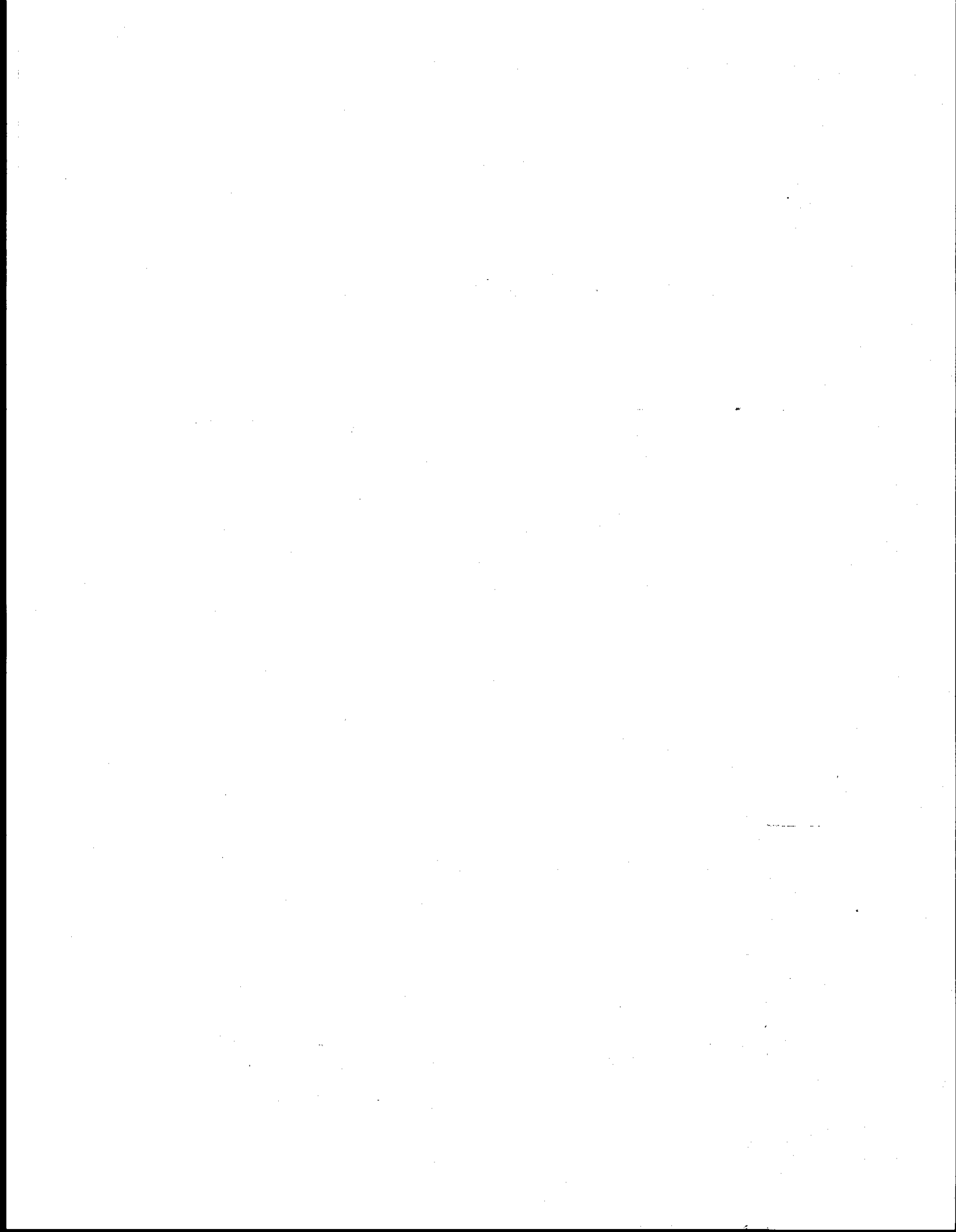
9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 0%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 12-27-06

(Signature)

Pres.

(Title)



ANNUAL FARM REPORT

PLEASE TYPE OR USE BLACK INK
 Filed pursuant to the provisions of SDCL 47-9A

NO FILING FEE

FILE DATE 12/28/07

RECEIVED

DEC 28 2007

S.D. SEC. OF STATE

270 2845

1. Corporate name and address:



DF035025
 DF035025 NOV/2006
 SLATTERY BROS., INC.
 SLATTERY, JOHN M.
 29432 22ND AVE
 MARTIN SD 57551-9801

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

2. The state of incorporation is _____

3. The name of the registered agent in South Dakota and the registered office address is

John M. Slattery
29432 22nd Ave Martin, SD 57551

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

5. 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.

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

NAME

REPLACED

AS OFFICER OR DIRECTOR

7. 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 5000. (Degree of kindred is defined as number of generations with each generation being a degree.) #7 applies only to FAMILY FARM CORPORATIONS

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

NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
John M. Slattery	29432 22 nd Ave Martin, SD 57551	891	1st
Constance G Slattery	29432 22 nd Ave Martin, SD 57551	892	1st
Jeffrey P. Slattery	22507 294 th St. " " " 57551	1058	2nd
Paul H. Slattery	Box 104 " " " 57551	969	2nd
Joseph J. Slattery	6508 Truena Blvd Gillette, WY 82716	370	2nd
Jean M. Slattery	29322 22 nd Ave Martin, SD 57551	370	2nd
Holly R. Slattery	22507 294 th St. " " " 57551	250	2nd
Alma R. Slattery	Box 104 " " " 57551	200	2nd

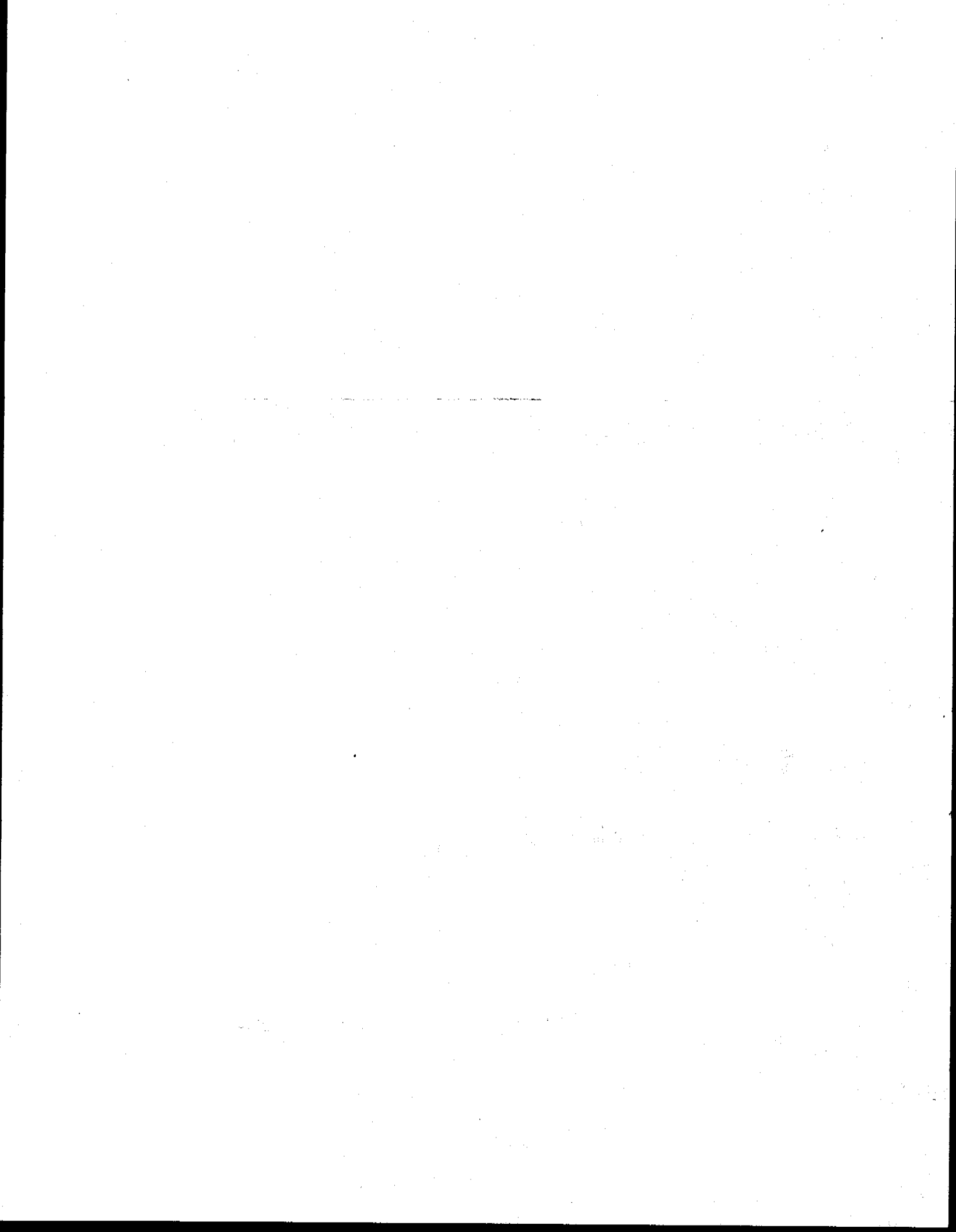
9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is _____ %.

(Applies only to AUTHORIZED FARM CORPORATION)

Dated 12-27-07

JH Slattery
 (Signature)

Pres.
 (Title)



270 2844 01/07/2008

2007

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 12/28/07
RECEIPT NO. 748030
RECEIVED
DEC 28 2007
S.D. SEC. OF STATE

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



* D F O 3 5 0 2 5 *
DF035025 NOV/2006
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 22ND AVE
MARTIN SD 57551-9801

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.

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 29432 225th Ave

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>Jeffrey P. Slattery</u>	President	<u>225 07 294th St</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Paul L. Slattery</u>	Vice President	<u>Box 104</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>
<u>Constance B. Slattery</u>	Secretary	<u>29432 225th Ave</u>	<u>"</u>	<u>SD</u>	<u>57551</u>
<u>Constance B. Slattery</u>	Treasurer	<u>29432 225th Ave</u>	<u>"</u>	<u>"</u>	<u>"</u>

SD law requires at least one director.
Do the above listed officers serve also as directors? YES NO If no, list directors below.
John M. Slattery Director 29432 225th Ave. Martin SD 57551

Director

4. Provide a brief description of the nature of the business farming ranching

5. The total number of authorized shares, itemized by class and series, if any, within each class:
NUMBER OF AUTHORIZED SHARES 10,000 CLASS _____ SERIES _____

6. NUMBER OF ISSUED SHARES 5,000 CLASS _____ SERIES _____

The statement may be signed by any authorized officer of the Corporation.
Dated 12-27-07

Signature Jeff Slattery Pres.

Printed Name Jeff Slattery, Pres.

Title President

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)

ANNUAL FARM REPORT Corporation

Please Type or Print Clearly in Ink

No Filing Fee

FILE DATE 12/29/08

RECEIPT NO _____

RECEIVED

DEC 29 2008

S.D. SEC. OF STATE

Telephone # _____

FAX # _____

FILING DATE: To be filed with the Annual Report.

1. Corporate ID, Name and Address:



DF035025
DF035025 NOV/2007
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 22ND AVE
MARTIN SD 57551-9801

2. The name of the South Dakota Registered Agent John M. Slattery

29432 225th Ave Martin SD 57551
Street Address (Required to be a South Dakota Address) City State ZIP+4

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

3. 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.

County	Section	Township	Acres
<u>Bennett</u>	<u>29 NW 1/4</u>	<u>T 37 - R 36</u>	<u>149</u>
<u>Bennett</u>	<u>W 1/2 30</u>	<u>T 37 - R 36</u>	<u>300</u>

4. Please complete the appropriate section:

Family Farm Corporation	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.	<u>5000</u>
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>0</u> %

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

Name	Address	City	State	Zip	Shares	Kindred
<u>John M Slattery</u>	<u>29432 225th Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>	<u>891</u>	<u>1st</u>
<u>Constance G Slattery</u>	<u>29432 225th Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>	<u>892</u>	<u>1st</u>
<u>Paul H. Slattery</u>	<u>306 1st Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>	<u>969</u>	<u>2nd</u>
<u>Jeffrey P. Slattery</u>	<u>22507 294th St.</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>	<u>1058</u>	<u>2nd</u>
<u>Phyllis R. Slattery</u>	<u>306 1st Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>	<u>200</u>	<u>2nd</u>
<u>Holly Rae Boomer Slattery</u>	<u>22507 294th St.</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>	<u>250</u>	<u>2nd</u>
<u>Jean M. Slattery Kirk</u>	<u>29322 225th Ave</u>	<u>Martin</u>	<u>SD</u>	<u>57551</u>	<u>370</u>	<u>2nd</u>
<u>Joseph J. Slattery</u>	<u>6509 Irving Blvd</u>	<u>Gillette</u>	<u>WY</u>	<u>82716</u>	<u>370</u>	<u>2nd</u>

Dated 12-22-08

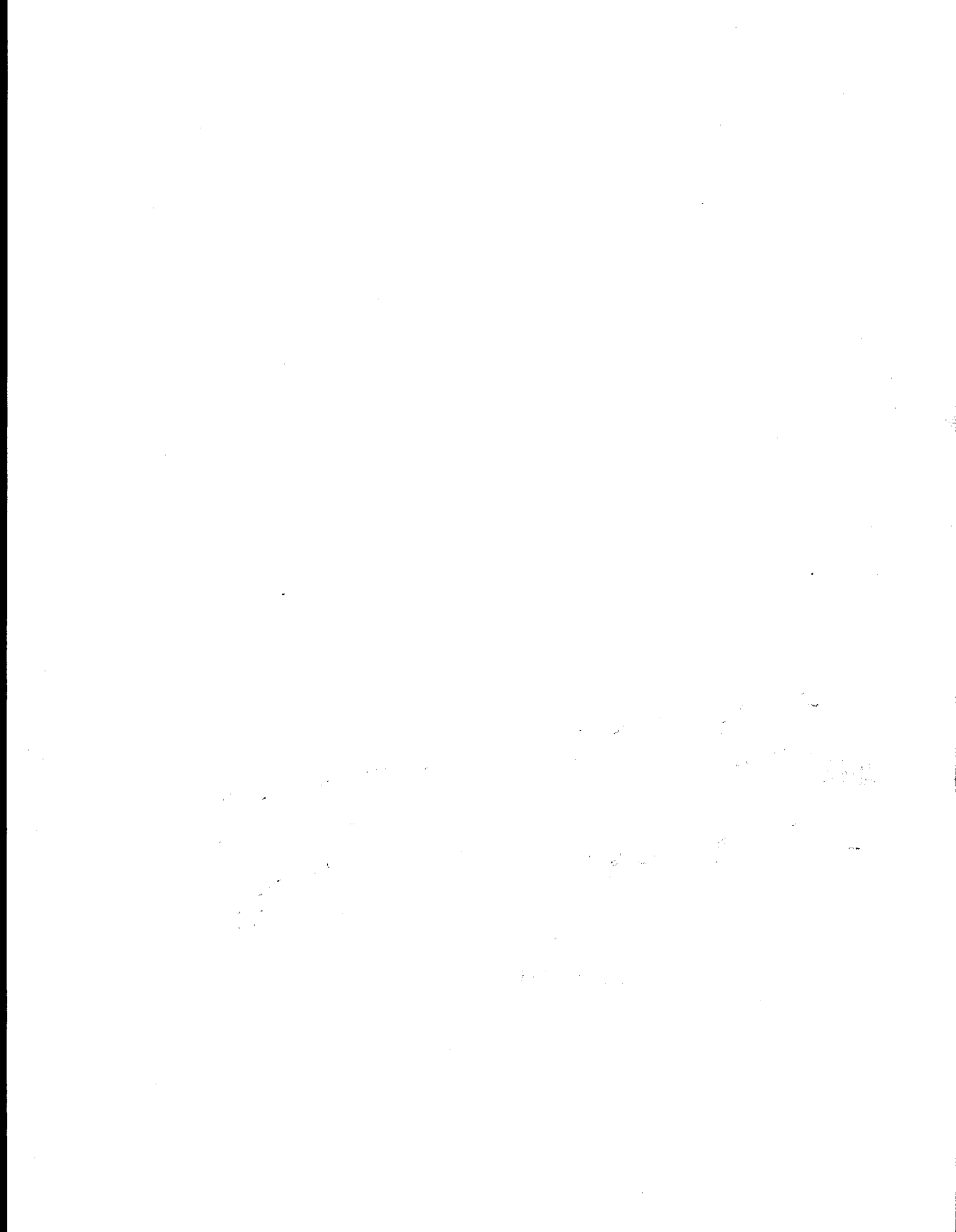
(Signature of an authorized officer)

Jeff Slattery

(Printed Name)

President

(Title)



284 2776 01/08/2009

2008

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: \$30 Make check payable to SECRETARY OF STATE

FILE DATE 12/29/08
RECEIPT NO 1465952
RECEIVED
DEC 29 2008
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DF035025 NOV/2007
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 22ND AVE
MARTIN SD 57551-9801

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.

29432 225th Ave Martin, SD 57551
Street Address City State ZIP+4
Same
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent

John M. Slattery
29432 225th Ave Martin SD 57551
Street Address (Required to be a South Dakota Address) City State ZIP+4
Same
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.

- Jeffrey P. Slattery 22507 294th St, Martin, SD. 57551
Paul L. Slattery 306 1st Ave Martin, SD. 57551
Constance Slattery 29432 225th Ave Martin, SD 57551
Constance Slattery 29432 225th Ave Martin SD 57551
John M. Slattery 29432 225th Ave Martin SD 57551
Paul L. Slattery 306 1st Ave Martin SD 57551

Dated 12-22-08

Signature of an authorized officer: Jeff Slattery
Printed Name: Jeff Slattery
Title: President

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)

300 1441 01/13/2010

2009

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: \$50 Make check payable to SECRETARY OF STATE

FILE DATE	12/24
RECEIPT NO	1986402
RECEIVED RECEIVED	
DEC 31 2009 JAN 12 2010	
S.D. SEC. OF STATE S.D. SEC. OF STATE	

1. Corporate Name, Registered Agent Name and Address:



DF035025 NOV/2008
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 22ND AVE
MARTIN SD 57551-9801

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.

2943 225th Ave Martin SD 57551
Street Address City State ZIP+4

Same as above
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent

John M. Slattery
29432 225th Ave Martin SD 57551
Street Address (Required to be a South Dakota Address) City State ZIP+4

Same
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.

- Jeffrey P. Slattery 22507 294th St. Martin SD 57551
President Street Address City State ZIP+4
- Paul L. Slattery 306 1st Ave Martin SD 57551
Vice President Street Address City State ZIP+4
- Constance G. Slattery 2942 225th Ave Martin SD 57551
Secretary Street Address City State ZIP+4
- Constance G. Slattery 29432 225th Ave Martin SD 57551
Treasurer Street Address City State ZIP+4
- John M. Slattery 29432 225th Ave Martin SD 57551
Director Street Address City State ZIP+4
- Paul L. Slattery 306 1st Ave Martin SD 57551
Director Street Address City State ZIP+4

Dated 12-28-09

(Signature of an authorized officer)
Jeff Slattery
(Printed Name)
President
(Title)

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

No fee

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 Slattery Brothers Inc.

2. The name of the registered agent on file John M. Slattery

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 (the address was HCS, Box 109)

29432 225th Ave Martin, SD 57551
Street Address (Required) City State ZIP+4

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

5. If the address has changed, its new address

29432 225th Ave Martin, SD 57551
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 1-8-09

[Signature]
(Signature of an authorized officer)

Jeff Slattery
(Printed Name)

President
(Title)

300 1442 01/13/2010

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

ANNUAL FARM REPORT

Corporation

Please Type or Print Clearly in Ink

No Filing Fee

RECEIVED

FILE DATE	01/12/11
RECEIPT NO	
JAN 12 2010 RECEIVED	
S.D. SEC. OF STATE DEC 31 2009	
S.D. SEC. OF STATE	

1. Corporate ID, Name and Address:



* D F 0 3 5 0 2 5 *
DF035025 NOV/2008
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 22ND AVE
MARTIN SD 57551-9801

Telephone #	
FAX #	
FILING DATE:	To be filed with the Annual Report.

2. The name of the South Dakota Registered Agent John M. Slattery
29432 22nd Ave Martin SD. 57551
Street Address (Required to be a South Dakota Address) City State ZIP+4

(same as above)

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

3. 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

County	Section	Township	Acres

4. Please complete the appropriate section:

Family Farm Corporation	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.	5000
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	0 %

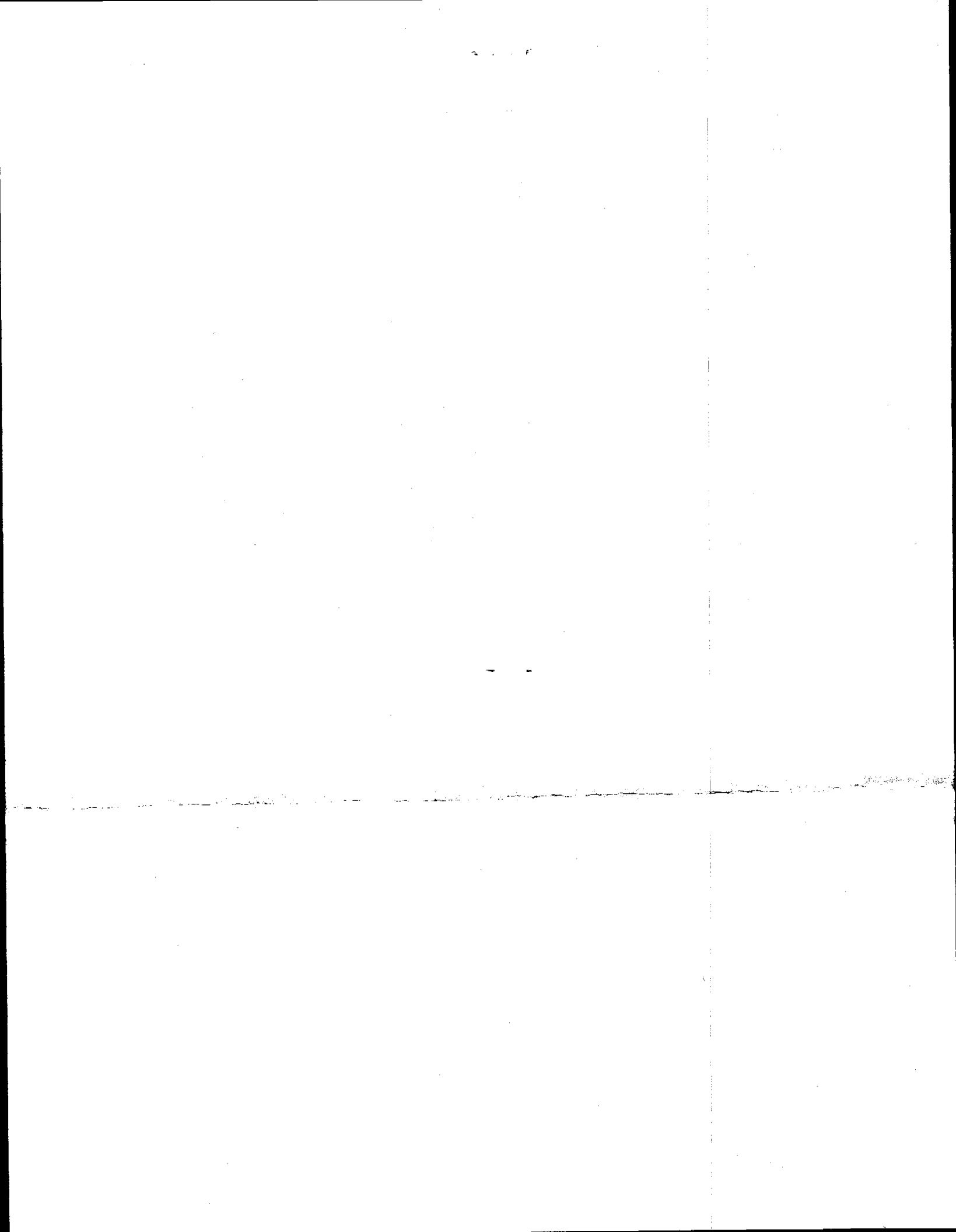
5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

(no changes)

Name	Address	City	State	Zip	Shares	Kindred

Dated 12-28-09

Jeff Slattery
(Signature of an authorized officer)
Jeff Slattery
(Printed Name)
President
(Title)



314 2527 01/05/2011

2010

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: \$50 Make check payable to SECRETARY OF STATE

FILE DATE 01/03/11
RECEIPT NO 2100809
RECEIVED
JAN 03 2011
S.D. SEC. OF STATE

Corporate Name, Registered Agent Name and Address:



* D F 0 3 5 0 2 5 *
DF035025 NOV/2009
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 225TH AVE
MARTIN SD 57551-6011

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 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:
29432 225th Ave Martin SD 57551-9801
Street Address City State ZIP+4

same
Mailing Address (Optional) City State ZIP+4

4. The name of the South Dakota Registered Agent John M. Slattery
29432 225th Ave Martin SD 57551-9801
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

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.

- Jeffrey P. Slattery 22507 294 st. Martin SD 57551
President Street Address City State ZIP+4
- Paul L. Slattery 306 1st Ave Martin SD 57551
Vice President Street Address City State ZIP+4
- Constance G. Slattery 29432 225th Ave Martin SD 57551
Secretary Street Address City State ZIP+4
- Constance G. Slattery 29432 225th Ave Martin SD 57551
Treasurer Street Address City State ZIP+4
- John M. Slattery 29432 225th Ave Martin SD 57551
Director Street Address City State ZIP+4
- Paul L. Slattery 306 1st Ave Martin SD 57551
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 12-29-10

Constance G. Slattery
(Signature of an Authorized Person)
Constance G. Slattery
(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 _____

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)

314 2528 01/05/2011

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

ANNUAL FARM REPORT Corporation

Please Type or Print Clearly in Ink
No Filing Fee

FILE DATE 01/03/11
RECEIPT NO. **RECEIVED**
JAN 03 2011
S.D. SEC. OF STATE

1. Corporate ID, Name and Address:



DF035025
DF035025 NOV/2009
SLATTERY BROS., INC.
SLATTERY, JOHN M.
29432 225TH AVE
MARTIN SD 57551-6011

Telephone # _____
FAX # _____
FILING DATE: To be filed with the Annual Report.

2. The name of the South Dakota Registered Agent

John M. Slattery

29432 225th Ave

Martin

SD

57551 6011

Street Address (Required to be a South Dakota Address)

City

State

ZIP+4

Same as above

Mailing Address (Optional - Required to be a South Dakota Address)

City

State

ZIP+4

3. 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.

Bennett

County Section Township Acres

County Section Township Acres

County Section Township Acres

4. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	<u>5000</u>
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>0</u> %

5. List any changes to shareholder name, address, number of shares owned, and degree of kindred.

(No changes)

Name Address City State Zip Shares

Name Address City State Zip Shares

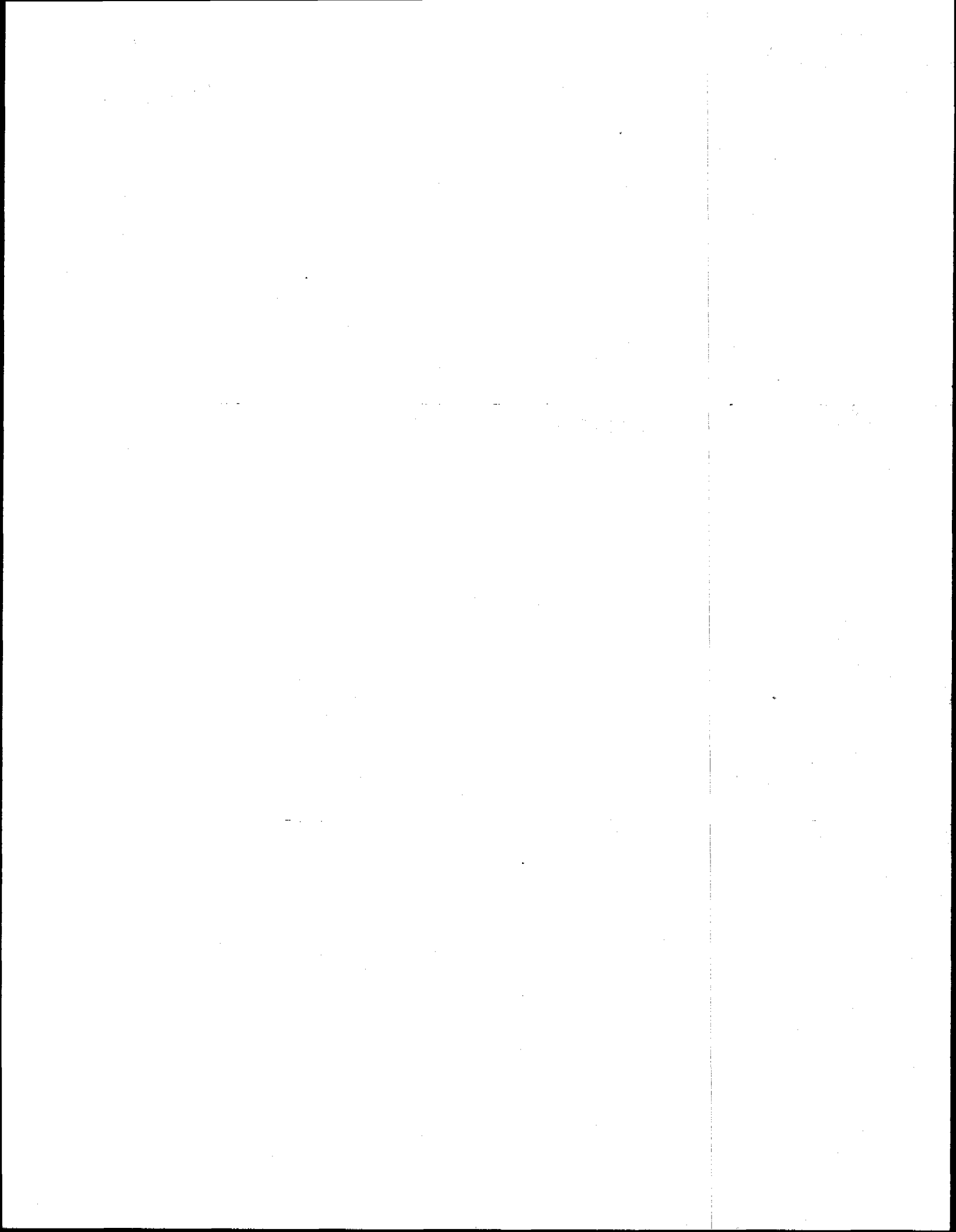
Name Address City State Zip Shares

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

Dated 12-29-10

Constance G. Slattery
(Signature of an Authorized Person)

Constance G. Slattery
(Printed Name)



2011

Enter Filing Year

ANNUAL FARM REPORT

FILE DATE 12/21/2011

Secretary of State Office

500 E Capitol Ave

Pierre, SD 57501

(605)773-4845

Corporation

FILING FEE: \$50.00 Please Type or Print Clearly In Ink
 Make check payable to SECRETARY OF STATE

RECEIPT NO 12320

1. Corporate Name and Address:

DF035025
 SLATTERY BROS., INC.
 29432 225TH AVE
 MARTIN, SD57551-6011

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

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

29432 225TH AVE	MARTIN	SD	57551-6011
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: JOHN M. SLATTERY

29432 225TH AVE	MARTIN	SD	57551-6011
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
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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.

<input type="checkbox"/>	JEFFREY P. SLATTERY	22507 294 ST	MARTIN	SD	57551
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PAUL L SLATTERY	306 1ST AVE	MARTIN	SD	57551
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Treasurer	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JOHN M SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

6. 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.

BENNETT	25, WEST 1/2	3737	320.00
County	Section	Tow nship	Acres

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	5000
Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	0%

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares	DOK
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JEFFREY P. SLATTERY	22507 294TH ST	MARTIN	SD	57551	1308
Name	Street Address	City	State	ZIP+4	Shares DOK
HOLLY BOOMER-SLATTERY	HC5, BOX 108	MARTIN	SD	57551	0
Name	Street Address	City	State	ZIP+4	Shares DOK

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.

Dated

Signature Accepted Electronically
 (Signature of an Authorized Person)

CONSTANCE G. SLATTERY
 (Printed Name)

2012

Enter Filing Year

ANNUAL FARM REPORT

FILE 11/9/2012

RECEIPT NO 74181

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

Corporation

Please Type or Print Clearly In Ink

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

1. Corporate Name and Address:

DF035025
SLATTERY BROS., INC.
29432 225TH AVE
MARTIN, SD 57551-6011

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

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

29432 225TH AVE	MARTIN	SD	57551-6011
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
-----------------	------	-------	-------

4. The name of the South Dakota Registered Agent

Agent Name: JOHN M. SLATTERY

29432 225TH AVE	MARTIN	SD	57551-6011
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
---	------	-------	-------

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.

<input type="checkbox"/>	JEFFREY P. SLATTERY	22507 294 ST	MARTIN	SD	57551
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PAUL L SLATTERY	306 1ST AVE	MARTIN	SD	57551
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Treasurer	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JOHN M SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

6. 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.

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	5000
Authorized Farm	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
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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

Signature Accepted Electronically

(Signature of an Authorized Person)

CONSTANCE G SLATTERY

(Printed Name)

2013

Enter Filing Year

ANNUAL FARM REPORT

FILE 10/17/2013

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

Corporation

Please Type or Print Clearly In Ink

RECEIPT NO 146637

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

1. Corporate Name and Address:

DF035025
SLATTERY BROS., INC.
29432 225TH AVE
MARTIN, SD 57551-6011

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

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

29432 225TH AVE	MARTIN	SD	57551-6011
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
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4. The name of the South Dakota Registered Agent

Agent Name: JOHN M. SLATTERY

29432 225TH AVE	MARTIN	SD	57551-6011
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
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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.

<input type="checkbox"/>	JEFFREY P. SLATTERY	22507 294 ST	MARTIN	SD	57551
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PAUL L SLATTERY	306 1ST AVE	MARTIN	SD	57551
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Treasurer	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JOHN M SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

6. 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.

7. Please complete the appropriate section:

Family Farm Corporation	The NUMBER OF SHARES owned by person(s) who are members of a family as defined in SDCL 47-9A-2, one of such shareholders being a family member who is residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm. (See SDCL 47-9A-14)	5000
Authorized Farm	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
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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

Signature Accepted Electronically

(Signature of an Authorized Person)

CONSTANCE G SLATTERY

(Printed Name)

2014

Enter Filing Year

ANNUAL FARM REPORT

FILE DATE 10/24/2014

RECEIPT NO 241517

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

Corporation

Please Type or Print Clearly In Ink

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

1. Corporate Name and Address:

DF035025
SLATTERY BROS., INC.
29432 225TH AVE
MARTIN, SD 57551-6011

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

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

29432 225TH AVE	MARTIN	SD	57551-6011
Street Address	City	State	ZIP+4

Mailing Address	City	State	ZIP+4
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4. The name of the South Dakota Registered Agent

Agent Name: JOHN M. SLATTERY

29432 225TH AVE	MARTIN	SD	57551-6011
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
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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.

<input type="checkbox"/>	JEFFREY P. SLATTERY	22507 294 ST	MARTIN	SD	57551
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PAUL L SLATTERY	306 1ST AVE	MARTIN	SD	57551
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Treasurer	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	JOHN M SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

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Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Street Address	City	State	ZIP+4	Shares
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Dated 10/24/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

TIANNA E LANG

(Printed Name)

2015

ANNUAL FARM REPORT

FILE DATE 10/20/2015

Enter Filing Year

Corporation

RECEIPT NO 344885

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

Telephone # _____

1. Corporate Name and Address:

DF035025

SLATTERY BROS., INC.

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

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

29432 225TH AVE MARTIN SD 57551-6011

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

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

Email Address (Optional)

4. The name of the South Dakota Registered Agent

Agent Name: JOHN M. SLATTERY

29432 225TH AVE MARTIN SD 57551-6011

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

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

Email Address (Optional)

5. The names and 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 type="checkbox"/>	JEFFREY P. SLATTERY	22507 294 ST	MARTIN	SD	57551
	President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	PAUL L SLATTERY	306 1ST AVE	MARTIN	SD	57551
	Vice President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Secretary	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	CONSTANCE G. SLATTERY	29432 225TH AVE	MARTIN	SD	57551
	Treasurer	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	JOHN M SLATTERY	29432 225TH AVE	MARTIN	SD	57551
Director	Actual Street Address	City	State	ZIP+4	

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

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Authorized Farm Corporation	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

8. List changes only of names, address and number of membership interests owned by shareholders.

Name	Actual Street Address	City	State	ZIP+4	Shares
------	-----------------------	------	-------	-------	--------

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

Dated 10/20/2015

Signature Accepted Electronically

(Signature of an Authorized Person)

Email _____

CONSTANCE G SLATTERY

(Optional)

(Printed Name)