

# State of South Dakota



## OFFICE OF THE SECRETARY OF STATE

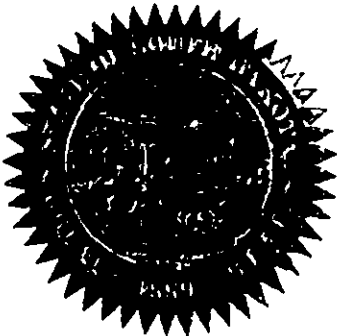
### CERTIFICATE OF INCORPORATION

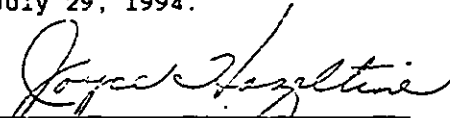
### NONPROFIT CORPORATION

I, JOYCE HAZELTINE, Secretary of State of the State of South Dakota, hereby certify that the Articles of Incorporation of WHEELS AND MEALS CORPORATION duly signed and verified, pursuant to the provisions of the South Dakota 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 WHEELS AND MEALS CORPORATION.

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 July 29, 1994.



  
JOYCE HAZELTINE  
Secretary of State

9 4 0 0 0 0 0 0 2

Filed this 29<sup>th</sup> day of July 1994  
*[Signature]*  
SECRETARY OF STATE

RECEIVED  
JUL 29 1994  
Secretary of State

ARTICLES OF INCORPORATION  
OF  
WHEELS AND MEALS CORPORATION

We, the undersigned, acting as incorporators of a corporation for the purpose of forming a South Dakota Corporation under Chapter 47-22 of SDCL, South Dakota Non-profit Corporation Act adopt the following Articles of Incorporation for said corporation:

ARTICLE I

Name

The name of this corporation is Wheels and Meals Corporation.

ARTICLE II

Place Of Business

The principal place of business of this corporation shall be 105 North Broadway, Miller, Hand County, South Dakota 57362.

ARTICLE III

Duration

The period of existence is perpetual.

ARTICLE IV

Purpose and Power

The purposes for which the Corporation is organized are as follows:

- (a) The corporation is a non profit corporation and no part of the net earning or assets of said corporation shall inure to the benefit of any donor, member, director, officer, employee or private individual. No part of the activities of the corporation shall consist of participation



corporation as determined by the Mayor of the City of Miller, South Dakota, and approved by the Common Council of the City of Miller, South Dakota, provided that said corporation be organized and operated as a corporation exempt under Section 501 C-3 for the same purposes as originally established. Officers of the existing corporation and the Mayor of the City of Miller will supervise the dissolution process for compliance to all applicable Federal, State, local and organizations statutes and regulations.

#### ARTICLE VIII

##### Registration Office and Agent

The address of the registered office of this corporation is P.O. Box 5, 105 North Broadway, Miller, South Dakota 57362, and the name of its registered agent at such address is James L. Lewis.

#### ARTICLE IX

##### Directors and Officers

The number of directors constituting the board of directors is five and the names and addresses of the persons who are to serve as directors are:

<u>Name</u>	<u>Address</u>
Harriet Kopplin	304 East 5th Street Miller, South Dakota 57362
Annette Snodgrass	322 East 8th Street Miller, South Dakota 57362
Luella Schultz	525 East 4th Street Miller, South Dakota 57362
David Blachford	515 East 4th Street Miller, South Dakota 57362
Terry Augspurger	203 West 8th Street Miller, South Dakota 57362

#### ARTICLE X

##### Incorporators

The name and address of each incorporator is:

<u>Name</u>	<u>Address</u>
Terry Augspurger	203 West 8th Street Miller, South Dakota 57362
Annette Snodgrass	322 East 8th Street Miller, South Dakota 57362
Luella Schultz	525 East 4th Street Miller, South Dakota 57362

#### ARTICLE XI

##### By-Laws

The directors are empowered to adopt and establish by-laws and make rules and regulations for the management of the corporation's affairs.

Section 1. Code of By-Laws: The initial Code of By-Laws of the Corporation shall be adopted by its Board of Directors. The power to alter, amend, or repeal the By-Laws or to adopt a new Code of By-Laws shall be reserved to the Board of Directors, the affirmative vote of not less than eighty percent (80%) of the total number of directors being necessary to exercise such reserved power. The Code of By-Laws may contain any provisions for the regulation and management of the affairs of the Corporation not inconsistent with the Statute of the State of South Dakota, or these Articles of Incorporation.

Section 2. Meetings. Meetings of the directors may be held at such place, and at such time as may be specified in the Code of By-Laws.

#### ARTICLE XII

##### Amendments

These articles may be amended in the manner authorized by law at the time of amendment.

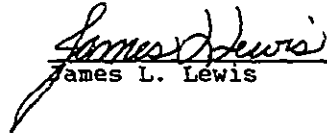


9 4 0 0 2 0 5 0 0 2

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, James L. Lewis, hereby give my consent  
to serve as the registered agent for Wheels and  
Meals, Inc.

Dated this 26<sup>th</sup> day of July, 1994.

  
James L. Lewis

Receipt No: 46578

9 4 0 3 2 6 8 0 5 0 2

File Number: NS010141

ART OF INC

FOR

WHEELS AND MEALS CORPORATION

File at the request of:

GREGORY REDIGER  
PO BOX 12  
MILLER SD 57362

STATE OF SOUTH DAKOTA

SS.

OFFICE OF THE SECRETARY OF STATE

Filed in the office of Secretary of State on

Date July 29, 1994

**Joyce Hazeltine**  
Secretary of State

Fee Recieved \$20.00

SOS CRP 491 10/93

1996

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

NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

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

FILE DATE 7-19-96  
RECEIPT NO. 855117

RECEIVED  
JUL 27 1996  
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

NS-010141 JUL/00  
WHEELS AND MEALS CORPORATION  
LEWIS, JAMES L.  
105 NORTH BROADWAY  
PO BOX 5  
MILLER, SD 57362-0005

Day Time Phone # 605-853-2869

Federal Identification #

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

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

- 2. The nature of the affairs which the corporation is conducting in South Dakota is To coordinate and manage the public transportation and nutrition activities and operations in Hand County
- 3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.
- B. The amount of property presently held by the corporation is \$ 0  
\* Property should include all real or personal property, or any interest therein, wherever situated.
- 4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	President				
	Vice President	<u>See Attached Sheet</u>			
	Secretary				
	Treasurer				

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	Director				
	Director	<u>See Attached Sheet</u>			
	Director				

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

Dated 6-26 1996

By David A. Blackford  
(Signature) must be signed in the presence of a notary

STATE OF Hand  
COUNTY OF South Dak ss

Its Chairman  
(Title)

I, James L. Lewis, a notary public, do hereby certify that on this 26 day of JUNE 1996 personally appeared before me David Blackford who, being by me first duly sworn, declared that he/she is the Chairperson of the corporation named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 4-8-2002

James Lewis  
Notary Public

(Notarial Seal)

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

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

FILING FEE: \* \$6 In addition to annual report fee  
\* No fee for postal renumbering. (must be stated on the form)

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

1. The name of the corporation is \_\_\_\_\_  
\_\_\_\_\_
2. The previous registered office address: \_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor (current) registered agent is \_\_\_\_\_  
\* The Consent of Registered Agent below must be completed by the new agent.
6. The street address, or a statement that there is no street address, of its registered office and the address of the office of its registered agent, as changed, will be identical. Such change was authorized by resolution duly adopted by its board of directors.

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

Date \_\_\_\_\_ 19\_\_\_\_\_  
\_\_\_\_\_  
(signature) must be signed in the presence of a notary  
\_\_\_\_\_  
(title)

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ \*\*

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

Notary Public

(Notarial Seal)

### CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

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

Dated \_\_\_\_\_ 19\_\_\_\_\_  
\_\_\_\_\_  
(signature)

05/06/96

THE CORPORATIONS SECTION 403

## LIST OF OFFICERS AND DIRECTORS FOR MS810141

NAME: WHEELS AND NEALS CORPORATION

TYPE: DIR NAME: MUGSPARGER, TERRY

ADDR1: 283 WEST 8TH ST

CITY: MILLER

ADDR2:

ST: SD ZIP: 57562

- Vice Chairperson

TYPE: DIR NAME: SHODGRASS, ANNETTE

ADDR1: 322 E 8TH ST

CITY: MILLER

ADDR2:

ST: SD ZIP: 57562

TYPE: DIR NAME:

ADDR1:

CITY:

*Cahalan, Faith M.**326 W 2*

ADDR2:

ST: SD ZIP: 57562

TYPE: DIR NAME: KOPPLIN, HARRIET

ADDR1: 304 E 5TH ST

CITY: MILLER

ADDR2:

ST: SD ZIP: 57562

Secretary/Treasurer

TYPE: DIR NAME: BLACHFORD, DAVID

ADDR1: 515 E 4TH ST

CITY: MILLER

ADDR2:

ST: SD ZIP: 57562

- Chairperson

1999

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

NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

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

FILE DATE 7-1-99  
RECEIPT NO. 210175

RECEIVED

JUN 25 1999

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

NS-010141 JUL/96  
WHEELS AND MEALS CORPORATION  
LEWIS, JAMES L.  
105 NORTH BROADWAY  
PO BOX 5  
MILLER, SD 57362-0005

Day Time Phone # 605-853-2869

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

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

- 2. The nature of the affairs which the corporation is conducting in South Dakota is To coordinate and manage the Public Transportation and Nutrition activities and operations in Hand County
- 3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.
- B. The amount of property presently held by the corporation is \$ -0-  
\*Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	President				
	Vice President				
	Secretary	<u>See attached sheet</u>			
	Treasurer				

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	Director				
	Director	<u>See attached sheet</u>			
	Director				

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

Dated 6-22 1999

By David Blackford  
(Signature) must be signed in the presence of a notary  
Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Hand

I, Judy Jenner, a notary public, do hereby certify that on this 23 day of June 1999, personally appeared before me David Blackford, who, being by me first duly sworn, declared that he/she is the President of the corporation named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires JUDY JENNER  
Notary Public, State of South Dakota  
My Commission Expires Aug. 16, 2001  
(Notarial Seal)

Judy Jenner  
Notary Public

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-8077  
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 Wheels and Meats Corporation
2. The previous (old) registered office address 105 North Broadway  
Miller, South Dakota ZIP + 4 57362-0005
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.  
SAME ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is JAMES L. LEWIS
5. The name of its successor (current) registered agent is Richard E. PALMER  
\*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 6-23 1999

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

Pres  
(Title)

STATE OF South Dakota  
COUNTY OF Ham

I, Judy Jenner, a notary public, do hereby certify that on this 23 day  
of June 1999, personally appeared before me David Blackford  
who, being by me first duly sworn, declared that he/she is the President of Wheels and  
Meats Corporation that he/she signed the foregoing document as officer of  
the corporation, and the statements therein contained are true.

My Commission Expires JUDY JENNER  
Notary Public, State of South Dakota  
My Commission Expires Aug. 16, 2001

Judy Jenner  
Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Richard Palmer, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for Wheels and Meats Corporation  
(corporate name)  
Dated 6-22 1999 Richard Palmer  
(signature)

**DIRECTORY OF WHEELS AND MEALS CORPORATION**

DATE 8/22/99  
 605 853-2830 MILLER  
 COUNTY 99 HAND  
 STATE SOUTH DAKOTA

AGENCY (NAME, ADDRESS, ZIP CODE)

AREA CODE

PHONE #



605

853-2869

OFFICE HOURS

8:30 - 12:00

M - F

1:00 - 5:00 P.M.

M - F

**EXECUTIVE DIRECTOR**

RICHARD E. PALMER

518 E. 4TH ST.

MILLER, SOUTH DAKOTA 57362 (605) 853-3198

**CHAIRPERSON**

DAVID BLACHFORD

515 E. 4TH ST.

MILLER, SOUTH DAKOTA 57362 (605) 853-3824

November 1, 1994

November 1, 1999

**VICE CHAIRPERSON**

FAITH CAHALAN

328 W. 2ND ST.

MILLER, SOUTH DAKOTA 57362 (605) 853-2472

November 1, 1995

November 1, 2000

**SECRETARY**

CAROLYN CORR

203 E 5TH ST

MILLER, SOUTH DAKOTA 57362 (605) 853-2737

November 1, 1998

November 1, 2002

**BOARD MEMBER**

WILLIAM KOST

520 W 7TH

MILLER, SOUTH DAKOTA 57362 (605) 853-2222

June 21, 1999

November 1, 2001

**BOARD MEMBER**

VACANT



DOUGLAS DEBOER

CITY HALL P.O. BOX 69

MILLER, SOUTH DAKOTA 57362 (605) 853-2705

**CHIEF FINANCE OFFICER**

RICHARD E. PALMER

516 E. 4TH ST.

MILLER, SOUTH DAKOTA 57362 (605) 853-3198

# 2002 NONPROFIT REPORT

20721502123  
718102

FILE DATE 7-1-02  
RECEIPT NO. 1111842  
**RECEIVED**  
**JUN 19 '02**  
S.D. SEC. OF STATE

PLEASE TYPE OR USE BLACK INK  
FILING FEE: \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE  
ADDITIONAL PENALTY FEE OF \$25 APPLIES TO ALL LATE FILINGS

1. Corporate Name, Registered Agent and Registered Address:



NS-010141 JUL/1999  
WHEELS AND MEALS CORPORATION  
PALMER, RICHARD E  
105 NORTH BROADWAY  
PO BOX 5  
MILLER SD 57362-0005

Day Time Phone # 605 953 2969  
Federal Taxpayer I  
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

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

2. The nature of the affairs which the corporation is conducting in South Dakota is To coordinate and manage the public Transportation and Nutrition activities and operations in Hand Co.

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.  
B. The amount of property presently held by the corporation is \$ 200  
\* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	President				
	Vice President				
	Secretary	<u>See attached sheet</u>			
	Treasurer				

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	Director				
	Director	<u>See attached sheet</u>			
	Director				

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

Dated 6-17-02  
By David W. Blackford  
(Signature)  
Its Pres.  
(Title)

STATE OF South Dakota ss  
COUNTY OF Hand  
On this the 17<sup>th</sup> day of June, 2002, before me, Terry Petrick  
personally appeared David W. Blackford, 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 MY COMMISSION EXPIRES FEB. 22, 2008  
(Notarial Seal)  
Terry Petrick  
Notary Public

\* K 1 0 1 0 1 4 1 \*

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

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

FILING FEE: \$5 in addition to corporate report fee

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

- The name of the corporation is Wheels & Meals Corporation  
105 N Broadway Miller S Dak 57362-0005
- The previous street address, or a statement that there is no street address, or its registered office is PO Box 5 SAME ZIP 57362-0005
- 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. 105 North Broadway  
Miller S Dak ZIP 57362-0005
- The name of its previous registered agent is Richard Palmer
- The name of its successor (current) registered agent is Richard Palmer

\*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 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 6-17-02

David W. Blackford  
(Signature) must be signed in the presence of a notary  
Pres.  
(Title)

STATE OF South Dakota ss  
COUNTY OF Hand

I, Jerry Petrick, a notary public, do hereby certify that on this 17th day of June, personally appeared before me David W. Blackford who, being by me first duly sworn, declared that he/she is the President of Wheels & Meals Corporation that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires MY COMMISSION EXPIRES FEB. 22, 2008

(Notarial Seal)

Jerry Petrick  
Notary Public

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, Richard Palmer  
(name of registered agent) hereby give my consent to serve as the registered agent for Wheels and Meals Corporation  
(corporate name)  
Dated 6/17/2002  
Richard Palmer  
(signature of registered agent)

**DIRECTORY OF WHEELS AND MEALS CORPORATION**

DATE 11/18/02  
CITY 57072 MILLER  
COUNTY 18102 HAND  
STATE SOUTH DAKOTA

N5010141

AGENCY (NAME, ADDRESS, ZIP CODE)

AREA CODE

PHONE #



605

853-2869

OFFICE HOURS

8:30 - 12:00

M - F

1:00 - 5:00 P.M.

M - F

**EXECUTIVE DIRECTOR**

RICHARD E. PALMER  
518 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

**CHAIRPERSON**

DAVID BLACHFORD  
515 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3824

November 1, 1999

November 1, 2004

**VICE CHAIRPERSON**

FAITH CAHALAN  
328 W. 2ND ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-2472

November 1, 2000

November 1, 2005

**SECRETARY**

CAPOLYN CORR  
203 E 5TH ST  
MILLER, SOUTH DAKOTA 57362 (605) 853-2737

November 1, 1998

November 1, 2002

**BOARD MEMBER**

WILLIAM KOST  
520 W 7TH  
MILLER, SOUTH DAKOTA 57362 (605) 853-2222

June 21, 1999

November 1, 2006

**BOARD MEMBER**

VIRGINIA JENNER  
404 EAST 7TH STREET  
MILLER, SOUTH DAKOTA 57362 (605) 853-3327

January 16, 2001

November 1, 2003

**CHIEF FINANCE OFFICER**

V. THOMAS MCGOUGH  
CITY HALL P.O. BOX 69  
MILLER, SOUTH DAKOTA 57362 (605) 853-2705

**CHIEF FINANCE OFFICER**

RICHARD E. PALMER  
518 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

229 2215 07/21/2004

# 2004

# NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

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

RECEIVED

JUL 14 04

S.D. SEC. of STATE

FILE DATE 7/14/04  
RECEIPT NO. 1340848

RECEIVED

JUN 29 04

S.D. SEC. of STATE

1. Corporate Name, Registered Agent and Registered Address:



\*NS010141\*  
NS010141 JUL/2002  
WHEELS AND MEALS CORPORATION  
PALMER, RICHARD E  
105 NORTH BROADWAY  
MILLER SD 57362-1349

Day Time Phone # 605-853-2869

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

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

2. The nature of the affairs which the corporation is conducting in South Dakota is to coordinate and manage the Public Transportation and Nutrition activities and operations in Hand Co (S.D.K)

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

B. The amount of property presently held by the corporation is \$ 45,000  
\* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	President				
	Vice President	<u>See Attached Sheet</u>			
	Secretary				
	Treasurer				

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	Director				
	Director	<u>See Attached Sheet</u>			
	Director				

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

Dated 7-12-04

Richard E. Palmer  
(Signature)  
President (Chairman)  
(Title)

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

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

**FILING FEE: \$5 In addition to corporate report fee**

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

1. The name of the corporation is Wheels & Meals Corp.  
105 North Broadway Miller S.Dak 57362
2. The previous street address, or a statement that there is no street address, or its registered office  
SAME ZIP \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address, if street addresses have not been assigned, or the RR address, must also be included. 105 North Broadway  
Miller S.Dak ZIP 57362-0005
4. The name of its previous registered agent is Richard PALMER
5. The name of its successor (current) registered agent is Richard PALMER

**\*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 officer.

Dated 7-12-04

David Blackford  
(Signature)

President (Chairman)  
(Title)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

I, Richard Palmer, hereby give my consent to serve as the  
(name of registered agent)  
registered agent for Wheels & Meals Corporation  
(corporate name)  
Dated 6-22-04  
Richard Palmer  
(signature of registered agent)

**DIRECTORY OF WHEELS AND MEALS CORPORATION**

DATE 6/22/2004  
 CITY MILLER  
 COUNTY HAND  
 STATE SOUTH DAKOTA

229 2216

**AGENCY (NAME, ADDRESS, ZIP CODE)**

AREA CODE

PHONE #

WHEELS AND MEALS CORPORATION  
 105 NORTH BROADWAY  
 P.O. BOX 5  
 MILLER, SOUTH DAKOTA 57362

605

853-2869

**OFFICE HOURS**

8:30 - 12:00  
 1:00 - 5:00 P.M.

M - F  
 M - F

**EXECUTIVE DIRECTOR**

RICHARD E. PALMER  
 516 E. 4TH ST.  
 MILLER, SOUTH DAKOTA 57362 (605) 853-3198

**CHAIRPERSON**

DAVID BLACHFORD  
 515 E. 4TH ST.  
 MILLER, SOUTH DAKOTA 57362 (605) 853-3824

**TERM BEGINS**

November 1, 1999

**TERM ENDS**

November 1, 2004

**VICE CHAIRPERSON**

FAITH CAHALAN  
 326 W. 2ND ST.  
 MILLER, SOUTH DAKOTA 57362 (605) 853-2472

November 1, 2000

November 1, 2005

**SECRETARY**

SHIRLEY STIRLING  
 706 WEST 1ST AVE  
 MILLER, SOUTH DAKOTA 57362 (605) 853-3888

November 1, 2002

November 1, 2007

**BOARD MEMBER**

WILLIAM KOST  
 520 W 7TH  
 MILLER, SOUTH DAKOTA 57362 (605) 853-2222

November 1, 2001

November 1, 2006

**BOARD MEMBER**

VIRGINIA JENNER  
 404 EAST 7TH STREET  
 MILLER, SOUTH DAKOTA 57362 (605) 853-3327

January 16, 2001

November 1, 2008

**CHIEF EXECUTIVE OFFICER OF LOCAL GOVERNMENT**

V. THOMAS MCGOUGH  
 CITY HALL P.O. BOX 69  
 MILLER, SOUTH DAKOTA 57362 (605) 853-2705

**CHIEF FINANCE OFFICER:**

RICHARD E. PALMER  
 516 E. 4TH ST.  
 MILLER, SOUTH DAKOTA 57362 (605) 853-3198

-----

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238 3449 07/07/2005

# 2005 NONPROFIT REPORT

FILE DATE 07/01/05  
RECEIPT NO. 1453328  
**RECEIVED**  
JUN 20 '05  
SD, SEC. of STATE

PLEASE TYPE OR USE BLACK INK

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

1. Corporate Name, Registered Agent and Registered Address:



\* NS010141 \*  
NS010141 JUL/2004  
WHEELS AND MEALS CORPORATION  
PALMER, RICHARD E  
105 NORTH BROADWAY  
MILLER SD 57362-1349

Day Time Phone # 605-853-2869  
Federal Taxpa  
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

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

2. The nature of the affairs which the corporation is conducting in South Dakota is to coordinate and manage the Public Transportation and Nutrition activities and operations in Hand Co.

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

B. The amount of property presently held by the corporation is \$ # 90,000  
\* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	President				
	Vice President	<u>See Attached Sheet</u>			
	Secretary				
	Treasurer				

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
	Director				
	Director	<u>See Attached Sheet</u>			
	Director				

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

Dated 6-16-05

David Blackford  
(Signature)

Pres.  
(Title)

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

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

**FILING FEE: \$5 in addition to corporate report fee**

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

1. The name of the corporation is \_\_\_\_\_  
\_\_\_\_\_
2. The previous street address, or a statement that there is no street address, or its registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor (current) registered agent is \_\_\_\_\_

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

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another 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 of registered agent)

238 3450

DIRECTORY OF WHEELS AND MEALS CORPORATION

NS010141  
2005

DATE  
CITY  
COUNTY  
STATE  
MILLER  
HAND  
SOUTH DAKOTA

AGENCY (NAME, ADDRESS, ZIP CODE)

WHEELS AND MEALS CORPORATION  
105 NORTH BROADWAY  
P.O. BOX 5  
MILLER, SOUTH DAKOTA 57362

AREA CODE  
605  
PHONE #  
853-2869

OFFICE HOURS  
8:30 - 12:00  
1:00 - 5:00 P.M.  
M - F  
M - F

EXECUTIVE DIRECTOR

RICHARD E. PALMER  
516 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

CHAIRPERSON

DAVID BLACHFORD  
515 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3824

TERM BEGINS  
November 1, 2004  
TERM ENDS  
November 1, 2009

VICE CHAIRPERSON

FAITH CAHALAN  
326 W. 2ND ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-2472

November 1, 2000  
November 1, 2005

SECRETARY

SHIRLEY STIRLING  
706 WEST 1ST AVE  
MILLER, SOUTH DAKOTA 57362 (605) 853-3888

November 1, 2002  
November 1, 2007

BOARD MEMBER

WILLIAM KOST  
520 W 7TH  
MILLER, SOUTH DAKOTA 57362 (605) 853-2222

November 1, 2001  
November 1, 2006

BOARD MEMBER

VIRGINIA JENNER  
404 EAST 7TH STREET  
MILLER, SOUTH DAKOTA 57362 (605) 853-3327

January 16, 2001  
November 1, 2008

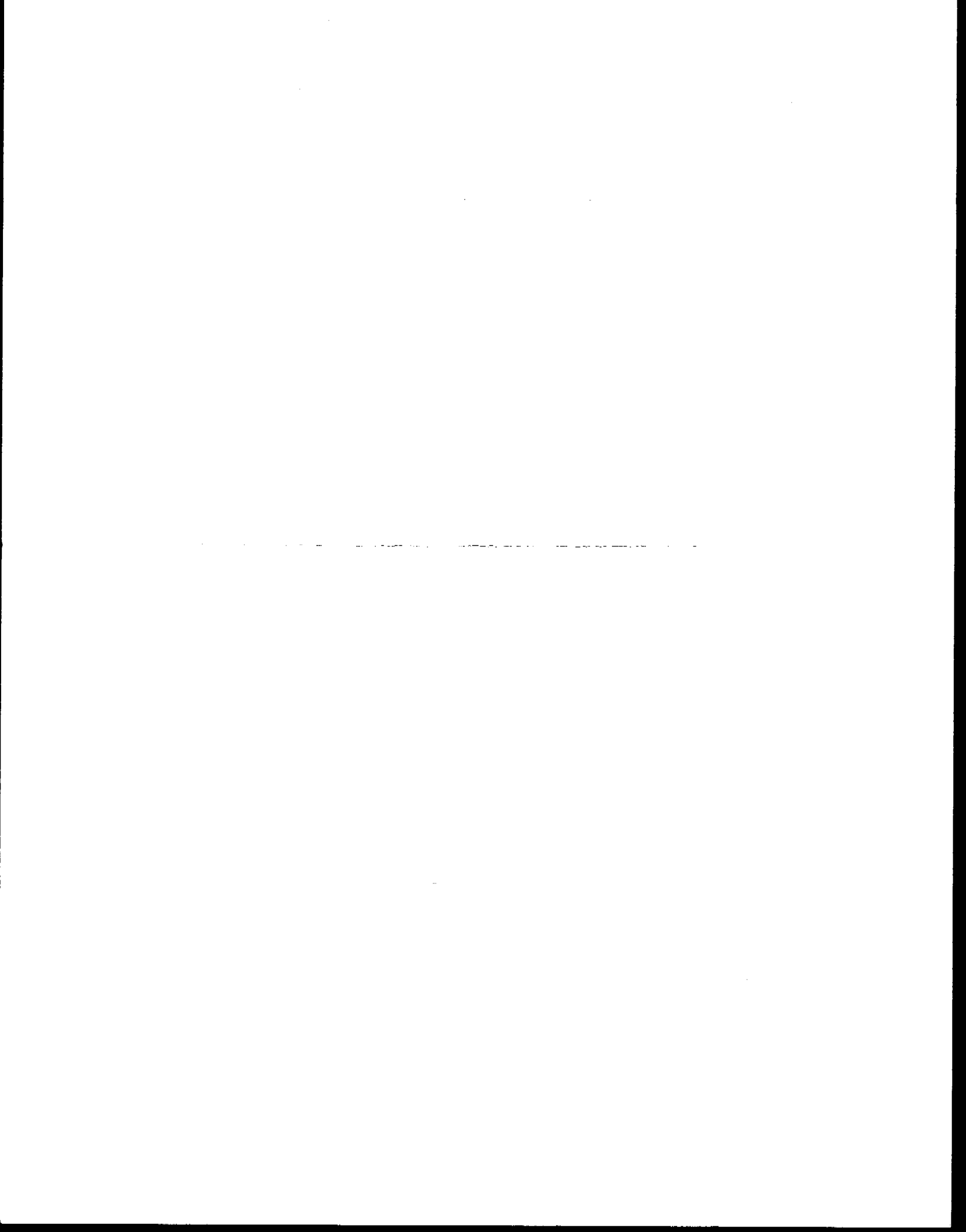
CHIEF EXECUTIVE OFFICER OF LOCAL GOVERNMENT

V. THOMAS MCGOUGH  
CITY HALL P.O. BOX 69  
MILLER, SOUTH DAKOTA 57362 (605) 853-2705

CHIEF FINANCE OFFICER:

RICHARD E. PALMER  
516 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

Rem: Board Members Wheels and Meals



250 3108 07/11/2006

# 2006 NONPROFIT REPORT

FILE DATE 07/01/06  
RECEIPT NO. 1571634  
**RECEIVED**  
JUN 22 '06  
S.D. SEC. OF STATE

PLEASE TYPE OR USE BLACK INK

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

1. Corporate Name, Registered Agent and Registered Address:



NS010141 JUL/2005  
WHEELS AND MEALS CORPORATION  
PALMER, RICHARD E  
105 NORTH BROADWAY  
MILLER SD 57362-1349

Day Time Phone # 605-853-2869  
Federal Tax#: \_\_\_\_\_  
FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

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

2. The nature of the affairs which the corporation is conducting in South Dakota is To coordinate & manage the Public Transportation and Nutrition activities and operations in Hand Co.

3. A. The amount of property which the corporation is authorized to hold is unlimited or as set forth in the articles of incorporation.  
B. The amount of property presently held by the corporation is \$ 118,000.00 \*  
\* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
<input type="checkbox"/>	President				
<input type="checkbox"/>	Vice President	<u>See Attached</u>			
<input type="checkbox"/>	Secretary				
<input type="checkbox"/>	Treasurer				

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please check the box next to the person's name above. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
<input type="checkbox"/>	Director				
<input type="checkbox"/>	Director	<u>See Attached.</u>			
<input type="checkbox"/>	Director				

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

Dated 6-20-06

David A. Blackford  
(Signature)  
Pres. / Chairman  
(Title)

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

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

**FILING FEE: \$5 In addition to corporate report fee**

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

1. The name of the corporation is \_\_\_\_\_  
\_\_\_\_\_
2. The previous street address, or a statement that there is no street address, or its registered office \_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_
3. The current address to which the registered office is to be changed. A PO box number can be used for mailing but a street address, or a statement that there is no street address if street addresses have not been assigned, or the RR address, must also be included. \_\_\_\_\_  
\_\_\_\_\_ ZIP \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor (current) registered agent is \* \_\_\_\_\_

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

6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement may be signed by the chairman of the board of directors, by its president, or by another 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 of registered agent)

250 3109 07/11/2006

13010141

# DIRECTORY OF WHEELS AND MEALS CORPORATION

DATE  
 CITY  
 COUNTY  
 STATE

**MILLER**  
**HAND**  
 SOUTH DAKOTA

## AGENCY (NAME, ADDRESS, ZIP CODE)

WHEELS AND MEALS CORPORATION  
 105 NORTH BROADWAY  
 P.O. BOX 5  
 MILLER, SOUTH DAKOTA 57362

AREA CODE                      PHONE #

605                                      853-2869

OFFICE HOURS  
 8:30 - 12:00                      M - F  
 1:00 - 5:00 P.M.                      M - F

## EXECUTIVE DIRECTOR

RICHARD E. PALMER  
 516 E. 4TH ST.  
 MILLER, SOUTH DAKOTA 57362      (605) 853-3198

## CHAIRPERSON

DAVID BLACHFORD  
 515 E. 4TH ST.  
 MILLER, SOUTH DAKOTA 57362      (605) 853-3824

TERM BEGINS                      TERM ENDS  
 November 1, 2004                      November 1, 2009

## VICE CHAIRPERSON

FAITH CAHALAN  
 326 W. 2ND ST.  
 MILLER, SOUTH DAKOTA 57362      (605) 853-2472

November 1, 2005                      November 1, 2010

## SECRETARY

SHIRLEY STIRLING  
 706 WEST 1ST AVE  
 MILLER, SOUTH DAKOTA 57362      (605) 853-3888

November 1, 2002                      November 1, 2007

## BOARD MEMBER

WILLIAM KOST  
 520 W 7TH  
 MILLER, SOUTH DAKOTA 57362      (605) 853-2222

November 1, 2001                      November 1, 2006

## BOARD MEMBER

VIRGINIA JENNER  
 404 EAST 7TH STREET  
 MILLER, SOUTH DAKOTA 57362      (605) 853-3327

January 16, 2001                      November 1, 2008

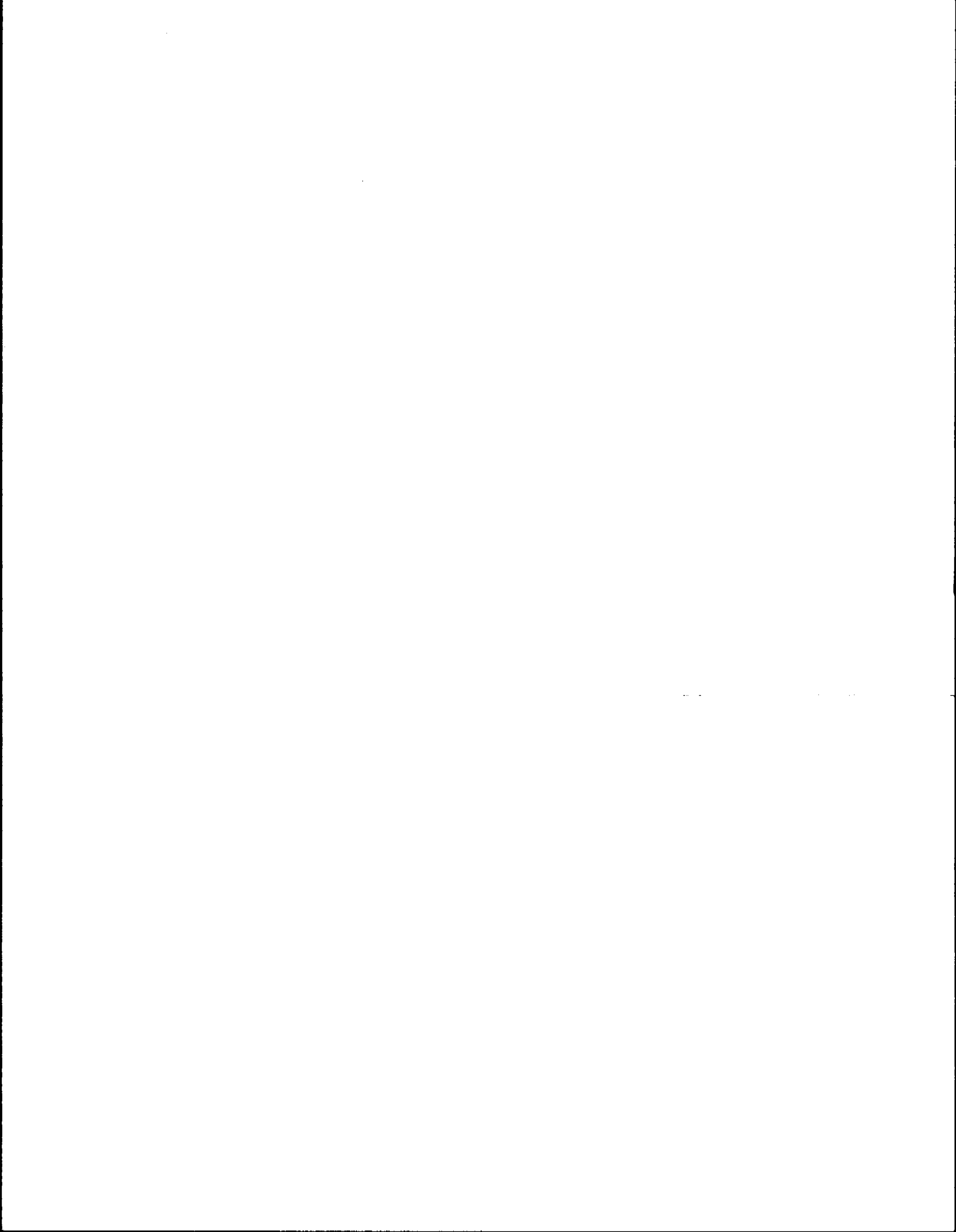
## CHIEF EXECUTIVE OFFICER OF LOCAL GOVERNMENT

V. THOMAS MCGOUGH  
 CITY HALL P.O. BOX 69  
 MILLER, SOUTH DAKOTA 57362      (605) 853-2705

## CHIEF FINANCE OFFICER:

RICHARD E. PALMER  
 516 E. 4TH ST.  
 MILLER, SOUTH DAKOTA 57362      (605) 853-3198

Rem: Board Members Wheels and Meals



# 2007 NONPROFIT REPORT

PLEASE TYPE OR USE BLACK INK

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

FILE DATE 07/03/07  
 RECEIPT NO. 1692728  
**RECEIVED**  
 JUL 03 2007 JUN 29 2007  
 S.D. SEC. OF STATE S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:



\* NS010141 \*  
 NS010141 JUL/2006  
 WHEELS AND MEALS CORPORATION  
 PALMER, RICHARD E  
 105 NORTH BROADWAY  
 MILLER SD 57362-1349

Day Time Phone # 605 853-2869  
 Federal Taxes  
 FILING DATE: Due during the month the Certificate  
 of Incorporation was issued, and delinquent after  
 the last day of the following month.

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

2. The nature of the affairs which the corporation is conducting in South Dakota is to coordinate & manage the Public Transportation & Negotiation Activities & operations in HAND County.

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

B. The amount of property presently held by the corporation is \$ 118,000.00  
 \* Property should include all real or personal property, or any interest therein, wherever situated.

4. The names and addresses of the corporation officers:

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
<input type="checkbox"/>	President				
<input type="checkbox"/>	Vice President				
<input type="checkbox"/>	Secretary				
<input type="checkbox"/>	Treasurer				

*See Attached*

5. The names and addresses of directors (State law requires a minimum of three). If the directors and officers are the same individuals, please check the box next to the person's name above. Attach an additional sheet if more space is needed to list directors.

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP
<input type="checkbox"/>	Director				
<input type="checkbox"/>	Director				
<input type="checkbox"/>	Director				

*See Attached*

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

Dated 6/27/07

Donald Blackford  
 (Signature)

Chairman  
 (Title)

263 3382

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

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

**FILING FEE: \$5 In addition to corporate report fee**

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

1. The name of the corporation is \_\_\_\_\_

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

\_\_\_\_\_ ZIP \_\_\_\_\_

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

\_\_\_\_\_ ZIP \_\_\_\_\_

4. The name of its previous registered agent is \_\_\_\_\_

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

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

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

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

The statement may be signed by the chairman of the board of directors, by its president, or by another 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 of registered agent)

**DIRECTORY OF WHEELS AND MEALS CORPORATION**

NS010141

DATE  
CITY  
COUNTY  
STATE  
MILLER  
HAND  
SOUTH DAKOTA

263 3383

**AGENCY (NAME, ADDRESS, ZIP CODE)**

**AREA CODE**

**PHONE #**

WHEELS AND MEALS CORPORATION  
105 NORTH BROADWAY  
P.O. BOX 5  
MILLER, SOUTH DAKOTA 57362

605

853-2869

**OFFICE HOURS**  
8:30 - 12:00  
1:00 - 5:00 P.M.

**M - F**  
**M - F**

**EXECUTIVE DIRECTOR / TREASURER**

RICHARD E. PALMER  
516 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

**CHAIRPERSON**

DAVID BLACHFORD  
515 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3824

**TERM BEGINS**  
November 1, 2004

**TERM ENDS**  
November 1, 2009

**VICE CHAIRPERSON**

FAITH CAHALAN  
326 W. 2ND ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-2472

November 1, 2005

November 1, 2010

**SECRETARY**

SHIRLEY STIRLING  
706 WEST 1ST AVE  
MILLER, SOUTH DAKOTA 57362 (605) 853-3888

November 1, 2002

November 1, 2007

**BOARD MEMBER**

JIM BEVERS  
217 East 2nd St  
MILLER, SOUTH DAKOTA 57362 (605) 853-2222

November 1, 2006

November 1, 2011

**BOARD MEMBER**

VIRGINIA JENNER  
404 EAST 7TH STREET  
MILLER, SOUTH DAKOTA 57362 (605) 853-3327

January 16, 2001

November 1, 2008

**CHIEF EXECUTIVE OFFICER OF LOCAL GOVERNMENT**

V. THOMAS MCGOUGH  
CITY HALL P.O. BOX 69  
MILLER, SOUTH DAKOTA 57362 (605) 853-2705

**CHIEF FINANCE OFFICER:**

RICHARD E. PALMER  
516 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

Rem: Board Members Wheels and Meals



2008

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

ANNUAL REPORT  
DOMESTIC NONPROFIT

Please Type or Print Clearly in Ink

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

FILE DATE 07/01/08  
RECEIPT NO 1811257  
**RECEIVED**  
JUN 25 2008  
S.D. SEC. OF STATE

Corporate Name, Registered Agent Name and Address:



\*NS010141\*  
NS010141 JUL/2007  
WHEELS AND MEALS CORPORATION  
PALMER, RICHARD E  
105 NORTH BROADWAY  
MILLER SD 57362-1349

Telephone # 605 853 2869  
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.

105 N Broadway Miller SD 57362-1349  
Street Address City State ZIP+4  
Same  
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent Richard Palmer

105 N Broadway Miller SD 57362-1349  
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 three directors.

- DAVID Blackford 515 E 4th St Miller SD 57362  
President Street Address City State ZIP+4
- Virginia Jenner 404 E 7th St Miller SD 57362  
Vice President Street Address City State ZIP+4
- CHAO Rembold 308 North Commercial St. Lawrence SD 57575  
Secretary Street Address City State ZIP+4
- See Attached  
Treasurer Street Address City State ZIP+4
- Director Street Address City State ZIP+4
- JAMES BEVERS 217 E 2nd St Miller SD 57362  
Director Street Address City State ZIP+4
- Lonnie Schroeder 410 N Broadway Miller SD 57362  
Director Street Address City State ZIP+4

Dated 6/23/08

*David N. Blackford*  
(Signature of an authorized officer)  
David N. Blackford  
(Printed Name)  
Pres.  
(Title)

278 1100

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)

278 1101 07/10/2008

**DIRECTORY OF WHEELS AND MEALS CORPORATION**

NS010141

DATE  
CITY  
COUNTY  
STATE  
MILLER  
HAND  
SOUTH DAKOTA

**AGENCY (NAME, ADDRESS, ZIP CODE)**

**AREA CODE**

**PHONE #**

WHEELS AND MEALS CORPORATION  
105 NORTH BROADWAY  
P.O. BOX 5  
MILLER, SOUTH DAKOTA 57362

**605**

**853-2869**

**OFFICE HOURS**

8:30 - 12:00  
1:00 - 5:00 P.M.

M - F  
M - F

**EXECUTIVE DIRECTOR / TREASURER**

RICHARD E. PALMER  
516 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

**CHAIRPERSON**

DAVID BLACHFORD  
515 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3824

**TERM BEGINS**  
November 1, 2004

**TERM ENDS**  
November 1, 2009

**VICE CHAIRPERSON**

VIRGINIA JENNER  
404 EAST 7TH STREET  
MILLER, SOUTH DAKOTA 57362 (605) 853-3327

**TERM BEGINS**  
January 16, 2001

**TERM ENDS**  
November 1, 2008

**SECRETARY**

CHAD REMBOLD  
308 NORTH COMMERCIAL AVE  
ST. LAWRENCE S.D. 57373 (605) 853-2250

**TERM BEGINS**  
November 1, 2007

**TERM ENDS**  
November 1, 2012

**BOARD MEMBER**

JIM BEVERS  
217 East 2nd St  
MILLER, SOUTH DAKOTA 57362 (605) 853-2264 HOME  
(605) 853-3051 WORK

**TERM BEGINS**  
November 1, 2006

**TERM ENDS**  
November 1, 2011

**BOARD MEMBER**

CONNIE SCHROEDER  
410 NORTH BROADWAY  
MILLER, SOUTH DAKOTA 57362 (605) 853-2447

**TERM BEGINS**  
November 1, 2007

**TERM ENDS**  
November 1, 2010

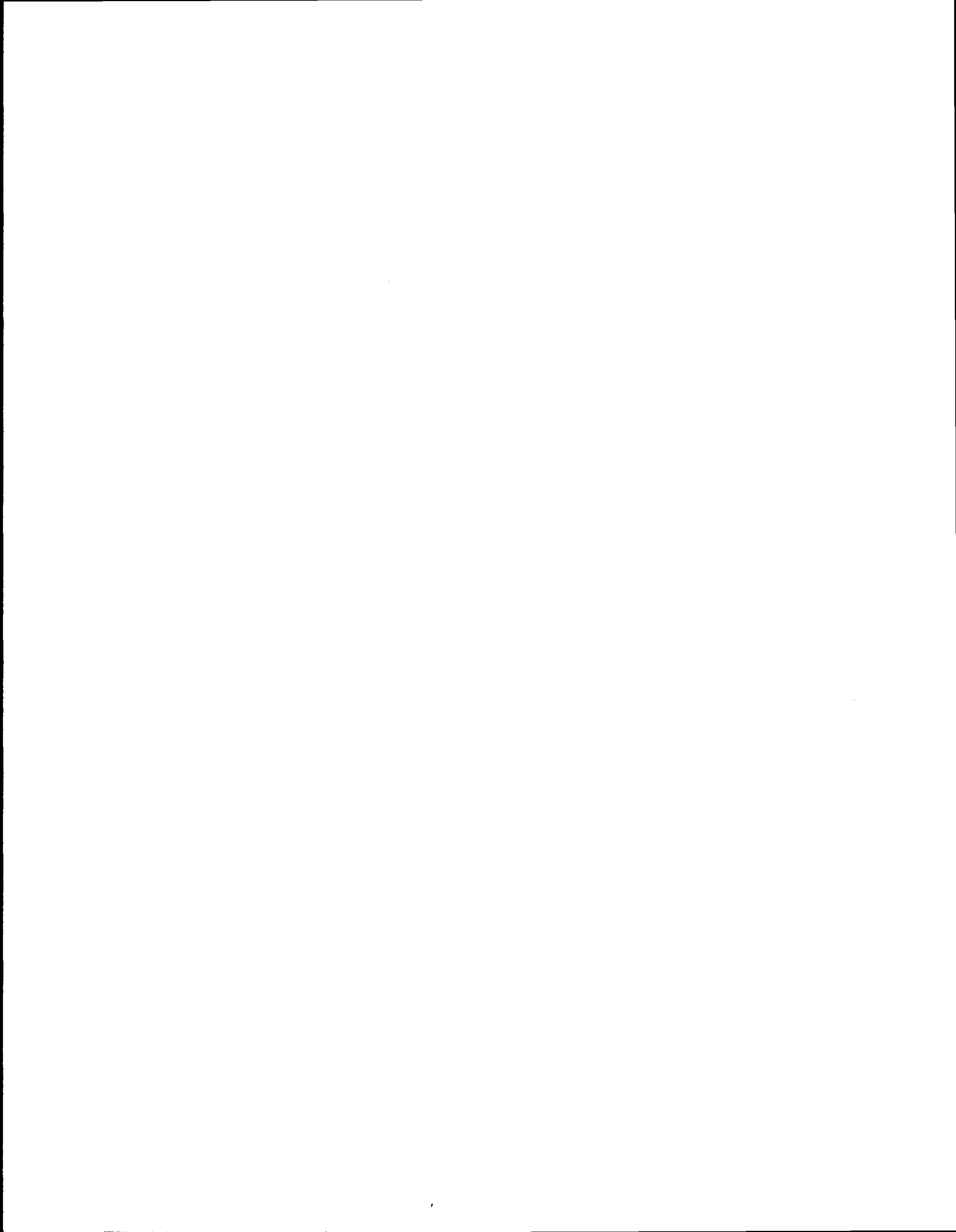
**CHIEF EXECUTIVE OFFICER OF LOCAL GOVERNMENT**

V. THOMAS MCGOUGH  
CITY HALL P.O. BOX 69  
MILLER, SOUTH DAKOTA 57362 (605) 853-2705

**CHIEF FINANCE OFFICER:**

RICHARD E. PALMER  
516 E. 4TH ST.  
MILLER, SOUTH DAKOTA 57362 (605) 853-3198

Rem: Board Members Wheels and Meals



2009

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

ANNUAL REPORT  
DOMESTIC NONPROFIT

Please Type or Print Clearly in Ink

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

FILE DATE 07/08/09  
RECEIPT NO 1927323  
**RECEIVED**  
**JUL 08 2009**  
**S.D. SEC. OF STATE**

1. Corporate Name, Registered Agent Name and Address:



\*NS010141\* JUL/2008  
WHEELS AND MEALS CORPORATION  
PALMER, RICHARD E  
105 NORTH BROADWAY  
MILLER SD 57362-1349

Telephone # 853-2869  
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.

105 North Broadway Miller SD 57362-1349  
Street Address City State ZIP+4

SAME  
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent

Richard Palmer

105 N Broadway Miller SD 57362-1349  
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 three directors.

David Blackford 515 E 4th St Miller SD 57362-1349  
President Street Address City State ZIP+4

James Bowers 217 E 2nd St Miller SD 57362-1349  
Vice President Street Address City State ZIP+4

Chad Rowland 308 North Commercial St. Lawrence SD 57373  
Secretary Street Address City State ZIP+4

\_\_\_\_\_  
Treasurer Street Address City State ZIP+4

Connie Schroeder 410 N Broadway Miller SD 57362-1349  
Director Street Address City State ZIP+4

Eleanor Irwin 1000 W 2nd St Miller SD 57362-1349  
Director Street Address City State ZIP+4

\_\_\_\_\_  
Director Street Address City State ZIP+4

Dated 7-6-2009

James W Bowers  
(Signature of an authorized officer)

James W Bowers  
(Printed Name)

Vice Chairman  
(Title)

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

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

Please Type or Print Clearly in Ink

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

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

1. The name of the entity \_\_\_\_\_  
\_\_\_\_\_

2. The name of the registered agent on file \_\_\_\_\_

The name of the successor registered agent \_\_\_\_\_

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

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

\_\_\_\_\_  
Street Address (Required) City State ZIP+4

\_\_\_\_\_  
Mailing Address (Optional) City State ZIP+4

5. If the address has changed, its new address

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

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

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

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an authorized officer)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Title)

2010

ANNUAL REPORT DOMESTIC NONPROFIT

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

Please Type or Print Clearly in Ink

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

RECEIVED RECEIVED JUN 28 2010 JUN 23 2010 S.D. SEC. OF STATE S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



NS010141 JUL/2009 WHEELS AND MEALS CORPORATION PALMER, RICHARD E 105 NORTH BROADWAY MILLER SD 57362-1349

Telephone # 853-2869 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.

105 N. Broadway Miller SD 57362-1349 Street Address City State ZIP+4

SAME Mailing Address (Optional) City State ZIP+4

4. The name of the South Dakota Registered Agent Richard Palmer

105 N Broadway Miller SD 57362-1349 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

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 three directors.

[X] David Blackford 515 E 4th St Miller SD 57362-1349 President Street Address City State ZIP+4

[X] JAMES BEVERS 217 E 2nd St Miller SD 57362-1349 Vice President Street Address City State ZIP+4

[X] Chad Rembold 308 N Commercial St. Lawrence SD 57373 Secretary Street Address City State ZIP+4

[X] Richard Palmer 105 N Broadway Miller SD 57362-1349 Treasurer Street Address City State ZIP+4

[X] Connie Schroeder 410 N Broadway Miller SD 57362-1349 Director Street Address City State ZIP+4

[X] GREGOR IVERSON 1000 W 2nd St Miller SD 57362-1349 Director Street Address City State ZIP+4

Director Street Address City State ZIP+4

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

Dated 6-21-2010

James W Bevers (Signature of an Authorized Person)

JAMES W BEVERS (Printed Name)

307 2145

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)

2011

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

ANNUAL REPORT  
DOMESTIC NONPROFIT

Please Type or Print Clearly in Ink

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

FILE DATE	6/6/11
RECEIPT NO	2112845
<b>RECEIVED</b>	
JUN 06 2011	
S.D. SEC. OF STATE	

Telephone #	853-2869
-------------	----------

1. Corporate Name, Registered Agent Name and Address:



NS010141 JUL/2010  
WHEELS AND MEALS CORPORATION  
PALMER, RICHARD E  
105 NORTH BROADWAY  
MILLER SD 57362-1349

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.

105 N Broadway Miller SD 57362-1349  
Street Address City State ZIP+4

Same  
Mailing Address City State ZIP+4

Email Address

4. The name of the South Dakota Registered Agent Richard Palmer

105 N Broadway Miller SD 57362-1349  
Street Address or Rural Route Box Number in This State and City State ZIP+4

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

Email Address

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

JAMES BEVERS 217 E 2nd St Miller SD 57362-1349  
President Street Address City State ZIP+4

CONNIE SCHROEDER 410 N Broadway Miller SD 57362-1349  
Vice President Street Address City State ZIP+4

ELEANOR IYESSON 1000 W 2nd St Miller SD 57362-1349  
Secretary Street Address City State ZIP+4

Richard Palmer 105 N Broadway Miller SD 57362-1349  
Treasurer Street Address City State ZIP+4

Chad Rembold 308 N Commercial St Lawrence SD 57373  
Director Street Address City State ZIP+4

JAN DEWTER 35060 1st Rec Heights SD 57371  
Director Street Address City State ZIP+4

\_\_\_\_\_  
Director Street Address City State ZIP+4

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

Dated 5-13-2011

James Bevers  
(Signature of an Authorized Person)

JAMES BEVERS  
(Printed Name)

Email \_\_\_\_\_

322 2983

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

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

Please Type or Print Clearly in Ink

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

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

1. The name of the entity \_\_\_\_\_  
\_\_\_\_\_

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

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

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

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

Street Address (Required) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP+4 \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP+4 \_\_\_\_\_

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

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

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

Email Address \_\_\_\_\_

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

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

Dated \_\_\_\_\_

\_\_\_\_\_  
(Signature of an Authorized Person)

Email \_\_\_\_\_

\_\_\_\_\_  
(Printed Name)

2012

Enter Filing Year

## ANNUAL REPORT

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

## DOMESTIC NONPROFIT

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

FILE 7/12/2012

RECEIPT NO 51850

## 1. Corporate Name and Address:

NS010141  
WHEELS AND MEALS CORPORATION  
105 N BROADWAY  
MILLER, SD 57362

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

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

105 N BROADWAY	MILLER	SD	57362
Street Address	City	State	ZIP+4

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

## 4. The name of the South Dakota Registered Agent

Agent Name: RICHARD E PALMER

105 NORTH BROADWAY	MILLER	SD	57362-1349
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 three director.

<input checked="" type="checkbox"/>	JAMES BEVERS	217 EAST 2ND ST	MILLER	SD	57362
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	CONNIE SCHROEDER	410 NORTH BROADWAY	MILLER	SD	57362
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	ELEANOR IVERSON	1000 WEST 2ND ST	MILER	SD	57362
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	RICHARD PALMER	105 N BROADWAY	MILLER	SD	57362
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CHAD REMBOLD	308 NORTH COMMERCIAL AVE	ST. LAWRENCE	SD	57373
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>	JAN DEUTER	35050 199TH ST	REE HEIGHTS	SD	57371
	Director	Street Address	City	State	ZIP+4

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

Date 07/12/2012

Signature Accepted Electronically

(Signature of an Authorized Person)

ELEANOR IVERSON

(Printed Name)

2013

Enter Filing Year

## ANNUAL REPORT

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

## DOMESTIC NONPROFIT

Please Type or Print Clearly In Ink

FILING FEE: \$10.00 Make check payable to SECRETARY OF STATE

FILE 6/20/2013

RECEIPT NO 122956

## 1. Corporate Name and Address:

NS010141  
WHEELS AND MEALS CORPORATION  
105 N BROADWAY  
MILLER, SD 57362

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

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

105 N BROADWAY	MILLER	SD	57362
Street Address	City	State	ZIP+4

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

## 4. The name of the South Dakota Registered Agent

Agent Name: RICHARD E PALMER

105 NORTH BROADWAY	MILLER	SD	57362-1349
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 three director.

<input checked="" type="checkbox"/>	JAMES BEVERS	217 EAST 2ND ST	MILLER	SD	57362
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	CONNIE SCHROEDER	410 NORTH BROADWAY	MILLER	SD	57362
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	ELEANOR IVERSON	1000 WEST 2ND ST	MILER	SD	57362
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>	RICHARD PALMER	105 N BROADWAY	MILLER	SD	57362
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CHAD REMBOLD	308 NORTH COMMERCIAL AVE	ST LAWRENCE	SD	57373
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>	JAN DEUTER	35050 199TH ST	REE HEIGHTS	SD	57371
	Director	Street Address	City	State	ZIP+4

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

Date 06/20/2013

Signature Accepted Electronically

(Signature of an Authorized Person)

RICHARD E PALMER

(Printed Name)

2014

Enter Filing Year

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

**DOMESTIC NONPROFIT**

Please Type or Print Clearly In Ink

**FILING FEE: \$10.00** Make check payable to SECRETARY OF STATE

FILE DATE 7/10/2014

RECEIPT NO 215778

1. Corporate Name and Address:

NS010141  
WHEELS AND MEALS CORPORATION  
105 N BROADWAY  
MILLER, SD 57362

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

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

Agent Name: RICHARD E PALMER

<u>105 NORTH BROADWAY</u>	<u>MILLER</u>	<u>SD</u>	<u>57362-1349</u>
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
<u>Mailing Address in This State, if Different from Street Address</u>	<u>City</u>	<u>State</u>	<u>ZIP+4</u>

4. If the address has changed, its new address.

New Agent Name: KRISTI K LICHTY

<u>105 N BROADWAY</u>	<u>MILLER</u>	<u>SD</u>	<u>57362-1349</u>
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
<u>Mailing Address in This State, if Different from Street Address</u>	<u>City</u>	<u>State</u>	<u>ZIP+4</u>

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 07/10/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

KRISTI K LICHTY

(Printed Name)

2014

Enter Filing Year

## ANNUAL REPORT

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

**DOMESTIC NONPROFIT**

Please Type or Print Clearly In Ink

**FILING FEE: \$10.00** Make check payable to SECRETARY OF STATEFILE DATE 7/10/2014RECEIPT NO 215778

## 1. Corporate Name and Address:

NS010141  
WHEELS AND MEALS CORPORATION  
105 N BROADWAY  
MILLER, SD 57362

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

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

105 N BROADWAY	MILLER	SD	57362
Street Address	City	State	ZIP+4

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

## 4. The name of the South Dakota Registered Agent

Agent Name: KRISTI K LICHTY

105 N BROADWAY	MILLER	SD	57362-1349
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 three director.

<input checked="" type="checkbox"/>	JAMES BEVERS	217 EAST 2ND ST	MILLER	SD	57362
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	CONNIE SCHROEDER	410 NORTH BROADWAY	MILLER	SD	57362
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>	ELEANOR IVERSON	1000 WEST 2ND ST	MILER	SD	57362
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	KRISTI K LICHTY	105 N BROADWAY	MILLER	SD	57362
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>	CHAD REMBOLD	308 NORTH COMMERCIAL AVE	ST LAWRENCE	SD	57373
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>	JAN DEUTER	35050 199TH ST	REE HEIGHTS	SD	57371
	Director	Street Address	City	State	ZIP+4

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

Dated 07/10/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

KRISTI K LICHTY

(Printed Name)

2015

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

ANNUAL REPORT  
**DOMESTIC NONPROFIT**  
 SDCL 47-27-18, 59-11-24

Please Type or Print Clearly In Ink

**FILING FEE: \$10.00** Make check payable to SECRETARY OF STATE

FILE DATE 7/15/2015

RECEIPT NO 319155

Telephone # \_\_\_\_\_

1. Corporate Name and Address:

NS010141

WHEELS AND MEALS CORPORATION

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

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

105 N BROADWAY MILLER SD 57362

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

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

manor@midconetwork.com

Email Address (Optional)

4. The name of the South Dakota Registered Agent

Agent Name: KRISTI K LICHTY

105 N BROADWAY MILLER SD 57362-1349

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

manor@midconetwork.com

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 three director.

JAMES BEVERS 217 EAST 2ND ST MILLER SD 57362  
 President Actual Street Address City State ZIP+4

CONNIE SCHROEDER 410 NORTH BROADWAY MILLER SD 57362  
 Vice President Actual Street Address City State ZIP+4

ELEANOR IVERSON 1000 WEST 2ND ST MILER SD 57362  
 Secretary Actual Street Address City State ZIP+4

KRISTI K LICHTY 105 N BROADWAY MILLER SD 57362  
 Treasurer Actual Street Address City State ZIP+4

<input type="checkbox"/>	CHAD REMBOLD	308 NORTH COMMERCIAL AVE	ST LAWRENCE	SD	57373
Director		Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	JAN DEUTER	35050 199TH ST	REE HEIGHTS	SD	57371
Director		Actual Street Address	City	State	ZIP+4

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

Dated

Email   
(Optional)

Signature Accepted Electronically  
\_\_\_\_\_  
(Signature of an Authorized Person)

\_\_\_\_\_  
(Printed Name)

\*By signing this form you agree to have both the fee and the form processed electronically.  
A fee of up to \$40 will be assessed for returned payments.

7/15/2015 9:36:07 AM

2016

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

ANNUAL REPORT  
**DOMESTIC NONPROFIT CORPORATIONS**

SDCL 47-24-6; 59-11-24

Please Type or Print Clearly In Ink

**FILING FEE: \$10.00** Make check payable to SECRETARY OF STATE

FILE DATE 6/22/2016

RECEIPT NO 428829

## 1. Corporate ID and Name:

NS010141

Enter Corporate ID

WHEELS AND MEALS CORPORATION

Enter Corporate Name

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

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

105 N BROADWAY

MILLER

SD

57362

Actual Street Address or Rural Route Box Number

City

State

ZIP+4

Mailing Address, if Different from Street Address

City

State

ZIP+4

## 4. The name of the South Dakota Registered Agent

Agent Name:

KRISTI K LICHTY

105 N BROADWAY

MILLER

SD

57362-1349

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

## 5. The names and addresses of its principal officers and directors (governors). South Dakota Law requires at least three directors.

<input checked="" type="checkbox"/>	JAMES BEVERS	217 EAST 2ND ST	MILLER	SD	57362
	President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	CONNIE SCHROEDER	410 NORTH BROADWAY	MILLER	SD	57362
	Secretary	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	ELEANOR IVERSON	1000 WEST 2ND ST	MILER	SD	57362
	Vice President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	KRISTI K LICHTY	105 N BROADWAY	MILLER	SD	57362
	Director	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	JAN DEUTER	35050 199TH ST	REE HEIGHTS	SD	57371
	Director	Actual Street Address	City	State	ZIP+4

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

Dated

Signature Accepted Electronically  
\_\_\_\_\_  
(Signature of an Authorized Person)  
**KRISTI K LICHTY**  
\_\_\_\_\_  
(Printed Name)

\*By signing this form you agree to have both the fee and the form processed electronically.  
A fee of up to \$40 will be assessed for returned payments.

6/22/2016 10:22:07 AM