

1994

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

9 4 0 2 1 7 1 1 0 9 0

# 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 1-24-94  
RECEIPT NO. 364745

JAN 24 1994

Secretary of State

1. Corporate Name, Registered Agent and Registered Address:

DF-014134	FEB/93
BRAUN FARMS, INC.	
TOBIN, THOMAS M.	
110 S. LINCOLN	
ABERDEEN, SD 57401-4214	

Telephone # 225-4897  
 FAX # \_\_\_\_\_  
 Federal Taxpayer ID \_\_\_\_\_  
 FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent the last day of the following month.

### \* \* \* \* ATTENTION - FILING INSTRUCTIONS \* \* \* \*

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

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

\* \* \* \* \*  
\* \* \* \* \*

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

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

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

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

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

5. NUMBER OF SHARES ISSUED CLASS SERIES

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

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

Dated 1-19 1994

By Gerald Braun  
(Signature)  
Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell a notary public, do hereby certify that on this 19 day of JANUARY, 1994, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms Inc.

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

My Commission Expires 2-30-96

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/82

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 street address, or a statement that there is no street address, to which the registered office is to be changed is \_\_\_\_\_  
\_\_\_\_\_ ZIP + 4 \_\_\_\_\_
4. The name of its previous registered agent is \_\_\_\_\_
5. The name of its successor registered agent is " \_\_\_\_\_  
\* The Consent of Registered Agent below must be completed by the new agent.
6. The address of its registered office and the address of the business office of its registered agent, as changed, will be identical.
7. This change has been authorized by resolution duly adopted by the board of directors.

The statement must be signed by the chairman of the board of directors, or by its president, or by another of its officers in the presence of a notary public.

Date \_\_\_\_\_ 19\_\_\_\_\_  
\_\_\_\_\_  
(signature)  
\_\_\_\_\_  
(title)

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ ss

I, \_\_\_\_\_, a notary public, do hereby certify that on this \_\_\_\_\_ day  
of \_\_\_\_\_ 19\_\_\_\_\_, personally appeared before me \_\_\_\_\_  
who, being by me first duly sworn, declared that he/she is the \_\_\_\_\_ of \_\_\_\_\_

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

My Commission Expires \_\_\_\_\_  
\_\_\_\_\_  
Notary Public

(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

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

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

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

9 4 0 8 1 7 1 1 0 0

# 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 1-24-94  
FILE NO. \_\_\_\_\_

RECEIVED

JAN 21 1994

Secretary of State

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

1. The name of the corporation is Braun Farms, Inc.

The state of incorporation is Warner, SD 57479

2. The name of the registered agent in South Dakota and the registered office address is Thomas M. Tobin

116 S. Lincoln, Aberdeen, SD Zip + 4 57401

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

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

None

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

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

None

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 340,000.

(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
------	---------	------------------	-------------------

None

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

Dated 1-19 19 94

By Gerald Braun  
(Signature)

Its President  
(Title)

STATE OF South Dakota ss

COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 19 day of JANUARY 19 94, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms Inc that he/she signed the foregoing document

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

My Commission Expires 8-30-96

Marilyn Littrell  
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: \$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 Braun Farms, Inc.
- The previous street address, or a statement that there is no street address, of its registered office 116 S. Lincoln St., Aberdeen, 57401 ZIP + 4 \_\_\_\_\_
- The street address, or a statement that there is no street address, to which the registered office is to be changed is Main Street  
Warner, South Dakota ZIP + 4 57479
- The name of its previous registered agent is Thomas M. Tobin
- The name of its successor registered agent is Gerald Braun  
\* 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 3-3 19 95  
Gerald Braun  
(signature)  
Braun  
(title)

STATE OF South Dakota  
COUNTY OF Brown 55

I, MARILYN LITTELL, a notary public, do hereby certify that on this 3 day of March 19 95, personally appeared before me, Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true.

My Commission Expires 8-30-96  
Marilyn Littell  
Notary Public

(Notarial Seal)

<b>CONSENT OF APPOINTMENT BY THE REGISTERED AGENT</b>	
I, <u>Gerald Braun</u>	, hereby give my consent to serve as the
(name of registered agent)	
registered agent for <u>Braun Farms, Inc.</u>	
(corporate name)	
Dated <u>3-3</u> 19 <u>95</u>	<u>Gerald Braun</u>
	(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 3-9-95  
FILE NO. \_\_\_\_\_

RECEIVED  
MAR 09 1995  
S.D. SEC. OF STATE

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

1. The name of the corporation is Braun Farms, Inc.

The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is \_\_\_\_\_

Gerald Braun, Warner, SD Zip + 4 57479

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

N/A

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

none

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

NAME

REPLACED

AS OFFICER OR DIRECTOR

none

6. The NUMBER OF SHARES owned by person(s) residing on the farm or actively operating the farm, or who has resided on or has actively operated the farm, or their relatives within the third degree of kindred, or by resident stockholders who are family farmers and are actively engaged in farming as their primary economic activity is 340,000.00  
(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

none

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is less than 1% (Applies only to AUTHORIZED FARM CORPORATION)

Dated 2-16 19 95

By Gerald Braun  
(Signature)

Its Pres.  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Pittell, a notary public, do hereby certify that on this 16 day of February 19 95, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true

My Commission Expires 2-30-96

Marilyn Pittell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

Receipt No. 450380

95031724228  
7/24/95

File No. DF014134

STATE OF SOUTH DAKOTA  
OFFICE OF THE SECRETARY OF STATE

SS.

Statement of Change

For

BRAUN FARMS, INC.

File at the request of:

BRAUN FARMS INC  
PO BOX 128  
WARNER SD 57479

Filed in the office of Secretary of State on

Date [REDACTED]

JOYCE HAZELTINE  
Secretary of State

Fee Received \$5

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6  
4  
8  
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4  
N  
N

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 5/20/96  
RECEIPT NO 544671

\$50

1 Corporate Name, Registered Agent and Registered Address

DF014134 BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
WARNER SD 57479

2-96

Telephone # 605-225-4897

FAX # 605-229-1021

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 5-13- 1996

By Gerald Braun  
(Signature)

Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 13 day of May 1996,

personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the  
of Braun Farms Inc.

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

My Commission Expires 8-31-96

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/95

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
606-773-4845

**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 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)

<b>CONSENT OF APPOINTMENT BY THE REGISTERED AGENT</b>	
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 \_\_\_\_\_  
FILE NO. \_\_\_\_\_

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 Braun Farms Inc.

The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is Gerald Braun

Box 48 Warner South Dakota Zip + 4 57479-0048

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.

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 340,000.00  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

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

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

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is less than 5 %. (Applies only to AUTHORIZED FARM CORPORATION)

Dated May 13 19 96

By Gerald Braun  
(Signature)

Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 13 day of May 1996,  
personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she  
is the President of Braun Farms Inc. that he/she signed the foregoing document  
as officer of the corporation, and the statements therein contained are true

My Commission Expires: \_\_\_\_\_

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

1997 ANNUAL REPORT

1997

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 2-24-97  
RECEIPT NO 606526

1 Corporate Name, Registered Agent and Registered Address

DE-014134 BRAUN FARMS, INC. BRAUN, GERALD MAIN STREET (PO BOX 48) WARNER, SD 57479-0048	FEB/96 ?
--	----------

Telephone # 605-225-4897  
FAX # 605-225-4931  
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 2-21 19 97

By Gerald Braun  
(Signature)  
Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 21 day of February 19 97, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms Inc.

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

My Commission Expires 8-30-2004

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/95

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 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 2-24-97  
FILE NO. \_\_\_\_\_

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 Braun Farms Inc.  
The state of incorporation is South Dakota
- The name of the registered agent in South Dakota and the registered office address is  
Box 48 Warner South Dakota Zip + 4 57479-0000
- 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 340,000.00.  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

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

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

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is brother 5%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated 2-21 19 97

By Gerald Braun  
(Signature)

Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 21 day of February 1997, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true

My Commission Expires 8-30-2004

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92



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 2-1-98  
RECEIPT NO. 657634  
**RECEIVED**  
**JAN 29 1998**

1. Corporate Name, Registered Agent and Registered Address.

DF-014134 FEB/97  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER, SD 57479-0048

Telephone # 605-225-4897  
FAX # 605-229-4091  
Federal Taxpayer ID \_\_\_\_\_  
FILING DATE: Due during the month the  
Certificate of Incorporation was issued,  
and delinquent after the last day of the  
following month.

**S.D. SEC. OF STATE**

### \* \* \* \* ATTENTION - FILING INSTRUCTIONS \* \* \* \*

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report 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 (unauthorized)	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 1-27-98 19\_\_

By Gerald Braun  
(Signature)  
its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 27 day of January 1998, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms Inc.

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

My Commission Expires 8-30-2002

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 6/97

1-6-94-09100097K

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-6070  
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 2-1-98  
FILE NO. \_\_\_\_\_

RECEIVED

JAN 29 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:

1. The name of the corporation is Braun Farms Inc.  
The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is Gerald Braun  
Box 48 Warner South Dakota Zip + 4 57479-0048

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.

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 340,000.00  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

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

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

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is less than 5%. (Applies only to AUTHORIZED FARM CORPORATION)

Dated January 27 19 98  
By Gerald Braun  
(Signature)  
Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 27 day of January 19 98, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of Braun Farms Inc. that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true  
My Commission Expires 8-30-2004

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 410 10/92

\*K/9904196.2654

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 3/26/99 RECEIVED NO. 786377 MAR 26 1999 RECEIVED MAR 11 1999 S.D. SEC. OF STATE S.D. SEC. OF ST.

1. Corporate Name, Registered Agent and Registered Address:

DF-014134 FEB/98 BRAUN FARMS, INC. BRAUN, GERALD MAIN STREET (PO BOX 48) WARNER, SD 57479-0048

Telephone # 605-225-4897 FAX # 605-... Federal Taxpayer IC FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

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

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

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

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

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

SD law requires at least one director. Do the above listed officers serve also as directors? YES \_\_\_ NO \_\_\_ If no, list directors below. 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 3-9 1999 By Gerald Braun (Signature) Its President (Title)

STATE OF South Dakota ss COUNTY OF Brown I, Myrtle Littell, a notary public, do hereby certify that on this 9 day of March 1999, personally appeared before me Gerald Braun who, being by me first duly sworn, declared that he/she is the President of BRAUN FARMS Inc the corporation named above, and signed the foregoing document as officer of the corporation, and the statements therein contained are true. My Commission Expires 8-30-2000 Notary Public

(Notarai Seal)

SOS CRP 6/98

SECRETARY OF STATE  
STATE CAPITOL  
600 E. CAPITOL  
PIERRE, S.D. 57501-5077  
805-773-4845

**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 \_\_\_\_\_  
FILE NO. \_\_\_\_\_

RECEIVED  
MAR 20 1999  
S.D. SEC. OF STATE

RECEIVED  
MAR 11 1999  
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 BROWN FARMS INC.  
The state of incorporation is SOUTH DAKOTA
- The name of the registered agent in South Dakota and the registered office address is Gerald Brown  
Box 48 WARNER SOUTH DAKOTA Zip + 4 57477
- 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 376 000.00  
(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 less than 5 % (Applies only to AUTHORIZED FARM CORPORATION)

Dated MARCH 9 1999 By Gerald Brown  
(Signature)  
Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

I, Marilyn Littrell, a notary public, do hereby certify that on this 9 day of MARCH 1999, personally appeared before me Gerald Brown who, being by me first duly sworn, declared that he/she is the President of Brown Farms Inc that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true  
My Commission Expires 3 30 2001  
Marilyn Littrell  
Notary Public

2000

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 2/23/00  
RECEIPT NO. 366580

RECEIVED

FEB 23 2000

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DF-014134 FEB/1999  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

Telephone # 605-225-4897

FAX # 605-229-XXXX

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 February 22, 2000

By Gerald Braun  
(Signature)

Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

On this the 22 day of February, 2000, before me, Marilyn Littrell  
personally appeared Gerald Braun, 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 8-30-2000

Marilyn Littrell  
Notary Public

(Notarial Seal)

SOS CRP 11/99

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

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

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

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

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

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

The statement may be signed by the chairman of the board of directors, by its president, or by another of its officers in the presence of a notary of public.

Dated \_\_\_\_\_ (Signature) \_\_\_\_\_  
\_\_\_\_\_  
(Title)

STATE OF \_\_\_\_\_ ss  
COUNTY OF \_\_\_\_\_

On this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, \_\_\_\_\_  
personally appeared \_\_\_\_\_, known to me, or proved to me,  
to be the \_\_\_\_\_ of the corporation that is described in and that executed the within  
instrument and acknowledged to me that such corporation executed the same.

My Commission Expires \_\_\_\_\_ Notary Public \_\_\_\_\_

(Notarial Seal)

**CONSENT OF APPOINTMENT BY THE REGISTERED AGENT**

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

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

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  
FEB 23 2000  
S.D. SEC. OF STATE

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

1. The name of the corporation is Braun Farms Inc.  
The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is Gerald Braun  
Box 48 Warner South Dakota Zip + 4 57479-0048

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.

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 340,000.00  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

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

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

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is less than 5 %. (Applies only to AUTHORIZED FARM CORPORATION)

Dated February 22, 2000

By Gerald Braun  
(Signature)

STATE OF South Dakota ss

Its President  
(Title)

COUNTY OF Braun

On this the 22 day of February, 2000, before me, Marilyn Little  
personally appeared Gerald Braun, 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 8-30-2000

Marilyn Little  
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) 773-4550

020321302483  
**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**  
FEB 11 '02  
S.D. SEC. OF STATE

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

1. The name of the corporation is BROWN FARMS INC.

The state of incorporation is SOUTH DAKOTA

2. The name of the registered agent in South Dakota and the registered office address is Gerald Brown  
P.O. Box 48 WARNER S.D.

3. If a foreign corporation, the address of its principal office, or registered office in its state of incorporation is \_\_\_\_\_ Zip + 4 57479

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.  
N/A

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

NAME	REPLACED	AS OFFICER OR DIRECTOR
<u>N/A</u>		

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 340,000.00  
(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>N/A</u>			

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is less than 5 % (Applies only to AUTHORIZED FARM CORPORATION)

Dated \_\_\_\_\_

STATE OF SOUTH DAKOTA  
COUNTY OF BROWN ss

By K  
(Signature)  
Its President  
(Title)

On this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, Marilyn Littrell,  
personally appeared Gerald Brown, 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 8-30-2004

Marilyn Littrell  
Notary Public

(Notarial Seal)

2001

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

ANNUAL REPORT

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 2-23-01  
RECEIPT NO 0965086

RECEIVED

1. Corporate Name, Registered Agent and Registered Address:

DF-014134 FEB/2000  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

Telephone # \_\_\_\_\_  
FAX # \_\_\_\_\_  
Federal Taxpayer ID \_\_\_\_\_

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

S.D. SECRETARY OF STATE

★ ★ ★ ★ ATTENTION - FILING INSTRUCTIONS ★ ★ ★ ★

If ALL of the information, including the registered agent and address listed in number one is identical as set forth in the prior report, you may check the box below and sign the report in the presence of a notary public. To report a change in the registered agent and/or office, both sides of this form must be fully completed. Any change requires full completion of the 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 2-21-01  
By Gerald Braun  
(Signature)  
its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss  
On this the 21 day of February, 20 01, before me, Marilyn Littrell  
personally appeared Gerald Braun, 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 8-30-2004  
Marilyn Littrell  
Notary Public

(Notary 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)

RETURN TO  
SECRETARY OF STATE  
STATE CAPITOL  
500 E CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4845  
FAX (605) 773-4560

# 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
FEB 23 2001
S.D. SEC. OF STATE

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

1. The name of the corporation is Braun Farms Inc.

The state of incorporation is South Dakota

2. The name of the registered agent in South Dakota and the registered office address is \_\_\_\_\_

Gerald Braun Box 48 Warner South Dakota Zip + 4 57479-0048

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:

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 340,000.00  
(Degree of kindred is defined as number of generations with each generation being a degree). #6 applies only to FAMILY FARM CORPORATIONS

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

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

8. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is less than 5% (Applies only to AUTHORIZED FARM CORPORATION)

Dated 2-21-2001

By Gerald Braun  
(Signature)

STATE OF South Dakota ss

is President  
(Title)

COUNTY OF Brown

On this the 21 day of February, 2001, before me, Marilyn Littrell

personally appeared Gerald Braun, 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 8-30-2004

Marilyn Littrell  
Notary Public

(Notarial Seal)

2003

ANNUAL REPORT

0305221.2453  
5/20/03

FILE DATE 3-17-03  
RECEIVED  
1195044  
MAR 17 '03

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

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:



DF014134 FEB/2002  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

Telephone # 605-225-4897  
FAX # 605-229-4001  
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 March 10, 2003 \_\_\_\_\_

By Gerald Braun  
(Signature)

Its President  
(Title)

STATE OF South Dakota  
COUNTY OF Brown ss

On this the 10 day of March 20 03, before me, Marilyn Littrell  
personally appeared Gerald Braun, 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 9-30-2004

Marilyn Littrell  
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/sos/sos.htm

SOS CRP 11/01

SECRETARY OF STATE  
STATE CAPITOL  
500 E. CAPITOL  
PIERRE, S.D. 57501-5077  
605-773-4846

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

File Date \_\_\_\_\_  
Receipt No. \_\_\_\_\_

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

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

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

The statement 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 BLOCK LETTERS  
Filed pursuant to the provisions of § 10-10-10A

NO FILING FEE

FILE DATE RECEIVED

MAR 17 '03

SECRETARY OF STATE

1. Corporate name and address:



DF014134 FEB/2002  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

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 Braun-Farms-Inc. South Dakota

3. The name of the registered agent in South Dakota and the registered office address is Gerald Braun Po Box 48 Warner, South Dakota 57479

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 persons 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 340 000. (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 Less than 5 %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-10-2003

Gerald Braun  
(Signature)

STATE OF South Dakota  
COUNTY OF Brown

President  
(Title)

On this the 10 day of March, 2003 before me, Marilyn Littrell personally appeared Gerald Braun 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.

8-30-2007  
My Commission Expires

Marilyn Littrell  
(Notary Public)

(Notarial Seal)



226 4049 03/19/04  
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

03/16/04  
FILE DATE RECORDED  
130/622  
MAR 15 2004

SD. SEC. OF STATE

1. Corporate name and address:



\* D F 0 1 4 1 3 4 \*  
DF014134 FEB/2003  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

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 BRAUN FARMS INC.

3. The name of the registered agent in South Dakota and the registered office address is GERALD BRAUN  
PO BOX 48 WARNER S.D. 57479

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 100% (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 66% %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 3-15-04  
STATE OF South DAKOTA  
COUNTY OF Brown

Gerald Braun  
(Signature)  
President  
(Title)

On this the 15 day of March, 2004, before me, Marilyn Littrell  
personally appeared Gerald Braun, 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.

8-30-2004  
My Commission Expires

Marilyn Littrell  
(Notary Public)

(Notarial Seal)





**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)

234 0100 03/08/2005

# 2005

# ANNUAL REPORT

DOMESTIC  
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 02/25/05  
RECEIVED  
1413280  
FEB 25 '05  
S.D. SEC. of STATE

1. Corporate Name, Registered Agent and Registered Address:



\* D F 0 1 4 1 3 4 \*  
DF014134 FEB/2004  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

Telephone # 605-225-4897  
FAX # \_\_\_\_\_  
Federal Taxpa \_\_\_\_\_  
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 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.

Dated 2-9-05

x Gerald Braun  
(Signature)

President  
(Title)

**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 02/25/05

RECEIVED

FEB 25 05

S.D. SEC. of STATE

234 0101

1. Corporate name and address:



\* D F 0 1 4 1 3 4 \*  
DF014134 FEB/2004  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

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 Gerald Braun

PO Box 48 Warner, South Dakota 57479

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 340,000.00. (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

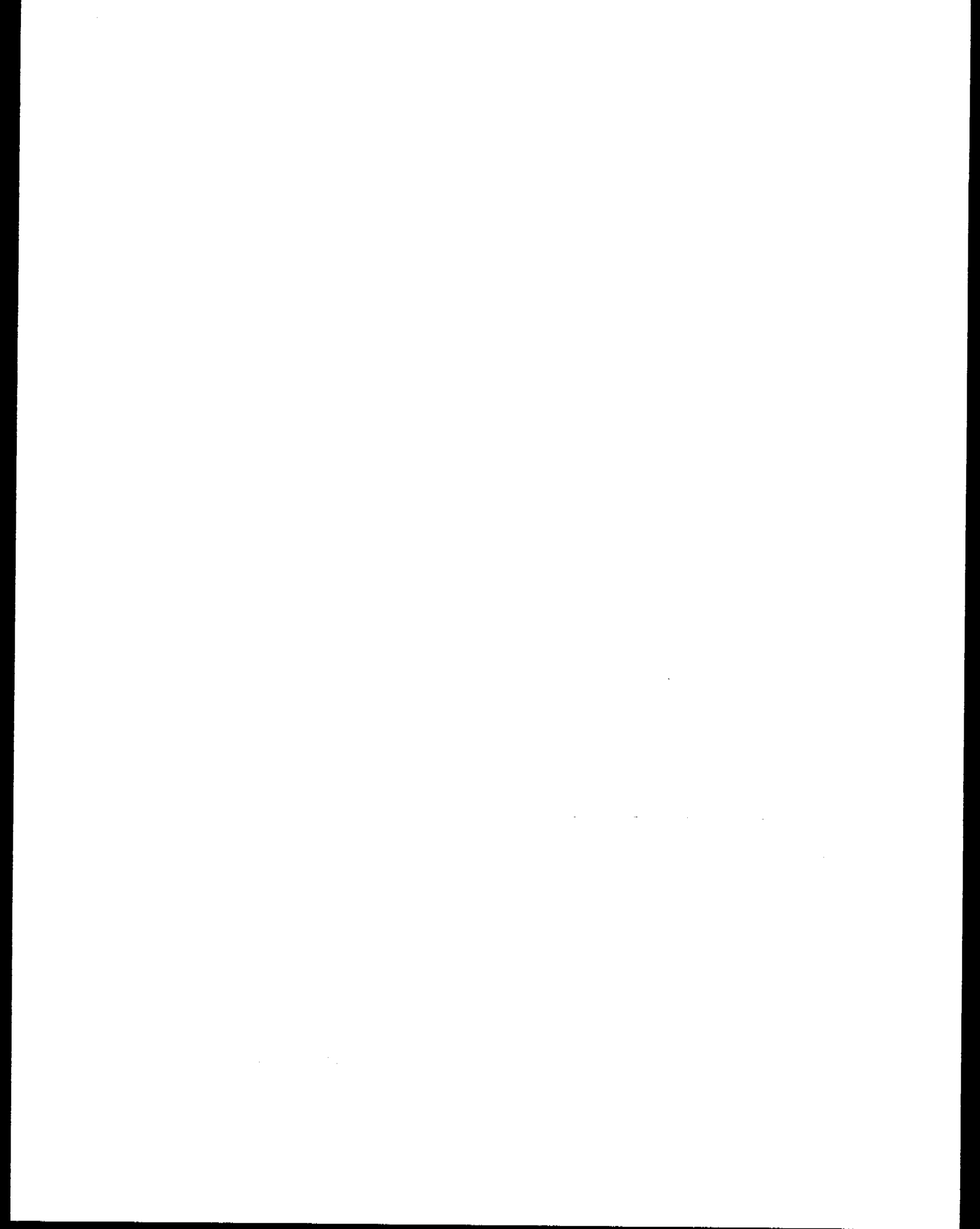
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is 5 %.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated February 23, 2005

Gerald Braun  
(Signature)

(Title)





**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)

245 4028 03/02/2006

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 02/17/06

RECEIVED  
RECEIVED  
FEB 08 '06  
FEB 17 '06  
S.D. SEC. OF STATE  
S.D. SEC. OF STATE

1. Corporate name and address:



\* D F O 1 4 1 3 4 \*  
DF014134 FEB/2005  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

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 \_\_\_\_\_  
Gerald Braun PO Box 48 Warner, SD 57479

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 340,000. (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

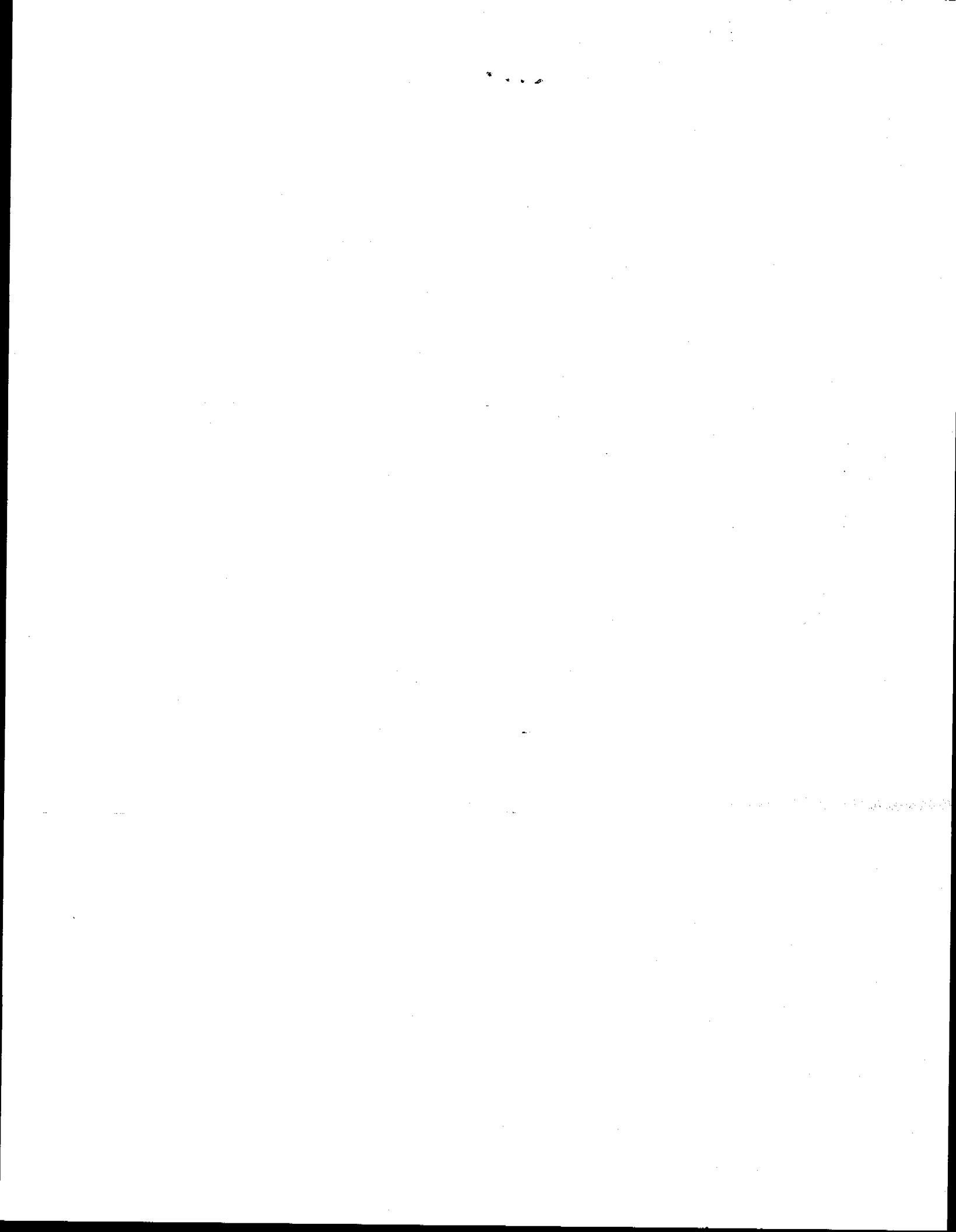
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED
------	---------	------------------	-------------------

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 \_\_\_\_\_

Gerald Braun  
(Signature)

President  
(Title)



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 02/23/07

RECEIVED

FEB 23 2007

S.D. SEC. OF STATE

1. Corporate name and address:



DF014134 FEB/2006  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

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 \_\_\_\_\_

GERALD BRAUN PO Box 48 WARNER SD 57479

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 340,000. (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
------	---------	------------------	-------------------

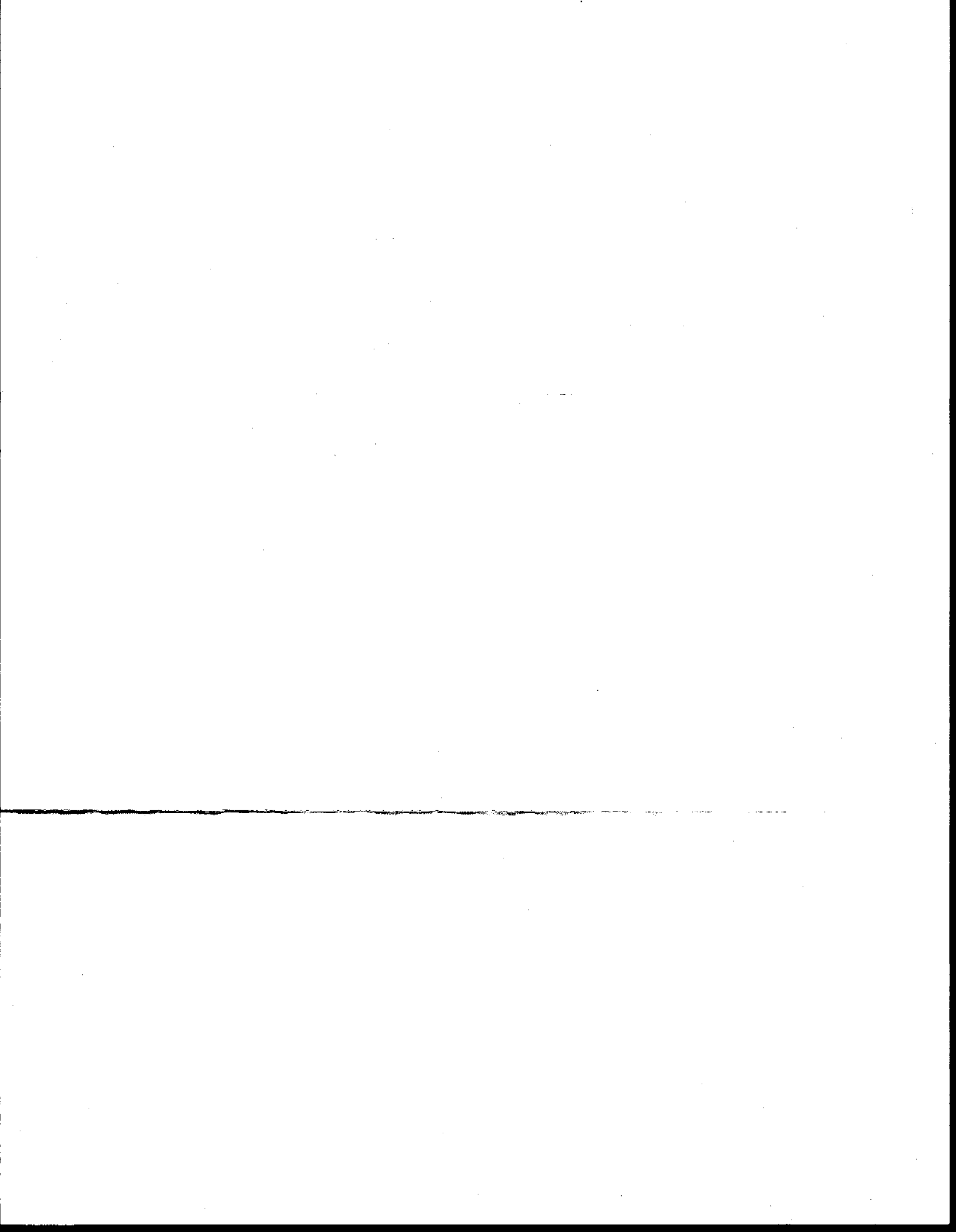
9. The percentage of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities is \_\_\_\_\_%.  
(Applies only to AUTHORIZED FARM CORPORATION)

Dated 2-13-07

Gerald Braun  
(Signature)

President  
(Title)

259 0151



2007

ANNUAL REPORT

FILE DATE 02/23/07
RECEIPT NO. 1648146

RECEIVED

FEB 23 2007

S.D. SEC. OF STATE

DOMESTIC

PLEASE TYPE OR USE BLACK INK

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

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



DF014134 FEB/2006
BRAUN FARMS, INC.
BRAUN, GERALD
MAIN STREET
(PO BOX 48)
WARNER SD 57479-0048

Telephone # 605-225-4897
FAX # 605-229-4091

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

Table with 6 columns: NAME, OFFICE, STREET ADDRESS, CITY, STATE, ZIP+4. Rows for President, Vice President, Secretary, Treasurer.

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

Director
Director

4. 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 2-13-07

Gerald Braun
Signature

GERALD BRAUN
Printed Name

President
Title

**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)

271 3778 02/01/2008

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 02/01/08

RECEIVED

JAN 24 2008

S.D. SEC. OF STATE

1. Corporate name and address:



\* D F 0 1 4 1 3 4 \*  
DF014134 FEB/2007  
BRAUN FARMS, INC.  
BRAUN, GERALD  
MAIN STREET  
(PO BOX 48)  
WARNER SD 57479-0048

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 \_\_\_\_\_

Gerald BRAUN P.O. Box 48 WARNER SD 57479

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 340.000. (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

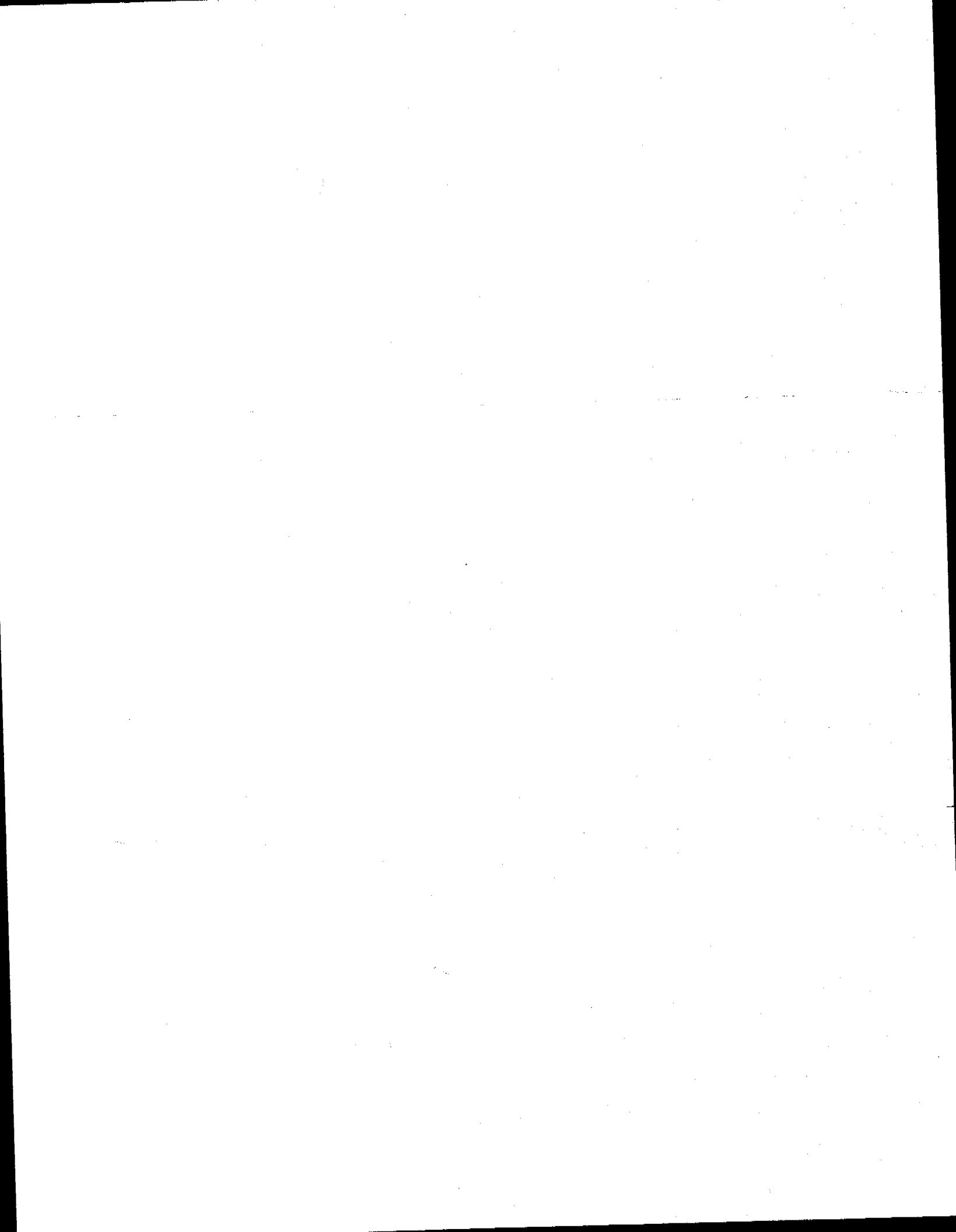
NAME	ADDRESS	NUMBER OF SHARES	DEGREE OF KINDRED

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 1-23-08

Gerald Braun  
(Signature)

President  
(Title)





**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)

288 1626

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

# 2009 ANNUAL REPORT DOMESTIC

Please Type or Print Clearly In Ink

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

FILE DATE 03/06/09  
 RECEIPT NO 1893919  
**RECEIVED**  
**MAR 06 2009**  
**S.D. SEC. OF STATE**

Telephone # (605) 225-4897  
 FAX # \_\_\_\_\_  
 FILING DATE: Due during the month the Certificate of Incorporation was issued, and delinquent after the last day of the following month.

1. Corporate ID and Name:

DF014134  
Braun Farms, Inc.  
3 West Main Street  
P. O. Box 48  
Warner, SD 57479

*02/08*

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

3 West Main Street	Warner	SD	57479
Street Address	City	State	ZIP+4
P. O. Box 48	Warner	SD	57479
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent John Braun

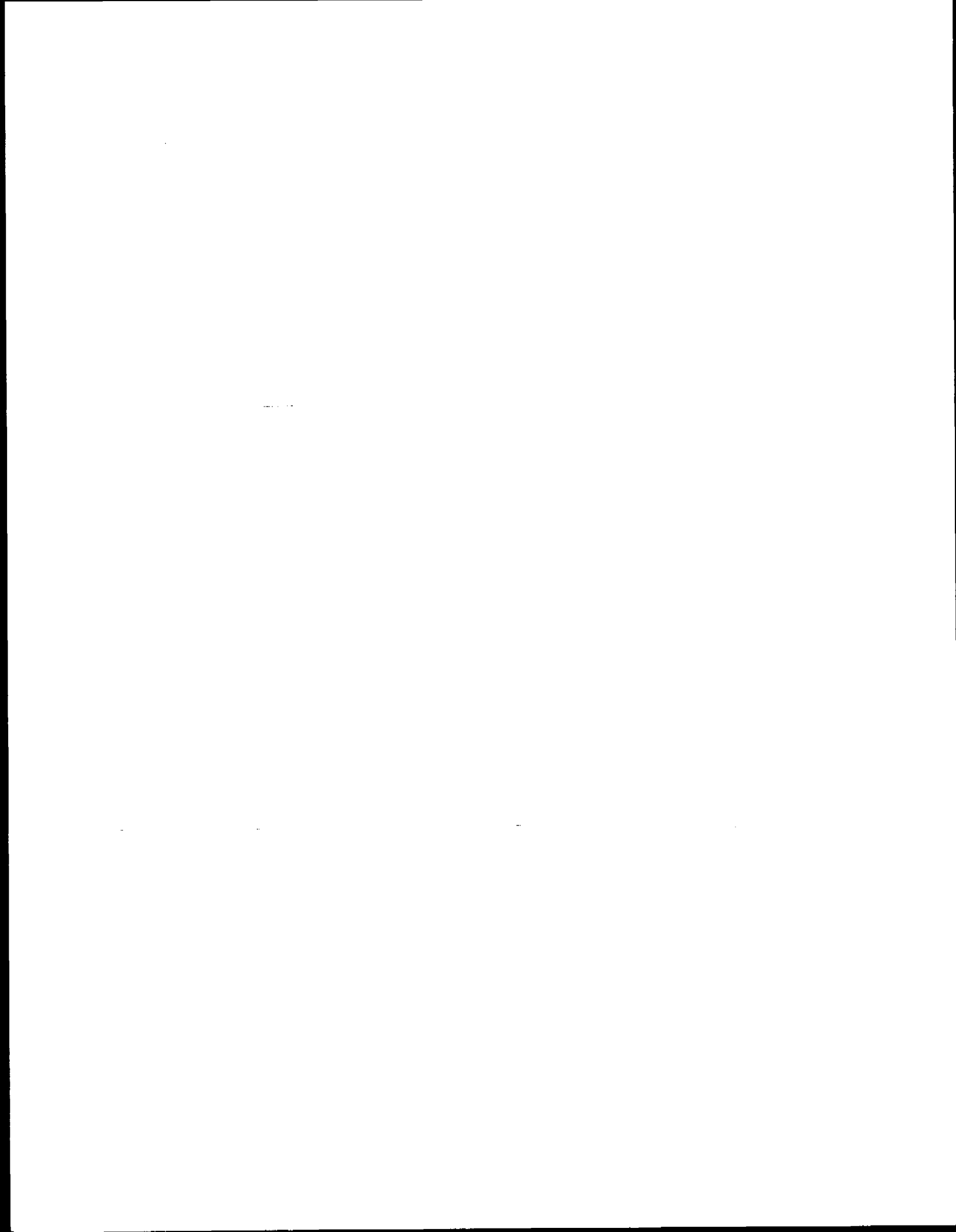
3 West Main Street	Warner	SD	57479
Street Address (Required to be a South Dakota Address)	City	State	ZIP+4
P. O. Box 48	Warner	SD	57479
Mailing Address (Optional - Required to be a South Dakota Address)	City	State	ZIP+4

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

<input checked="" type="checkbox"/>	John Braun	3 West Main Street	Warner	SD	57479
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>		Street Address	City	State	ZIP+4
	Vice President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Paula Braun	3 West Main Street	Warner	SD	57479
	Secretary	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	Paula Braun	3 West Main Street	Warner	SD	57479
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>		Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>		Street Address	City	State	ZIP+4
	Director	Street Address	City	State	ZIP+4

Dated 3-5-09

John Braun  
 (Signature of an authorized officer)  
John Braun  
 (Printed Name)  
 President  
 (Title)



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

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

Please Type or Print Clearly in Ink  
Please submit one **Original** and one **Photocopy**

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

FILE DATE	_____
RECEIPT NO	1892519
<b>RECEIVED</b>	
<b>MAR 06 2009</b>	
<b>S.D. SEC. OF STATE</b>	

Telephone #	(605) 225-4897
FAX #	_____

1. Corporate ID and Name:

DF014134

Braun Farms, Inc.  
3 West Main Street  
P. O. Box 48  
Warner, SD 57479

2. The name of the registered agent on file Gerald Braun

The name of the successor registered agent John Braun

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

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

3 West Main Street	Warner	SD	57479
Street Address (Required)	City	State	ZIP+4
P. O. Box 48	Warner	SD	57479
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.

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.

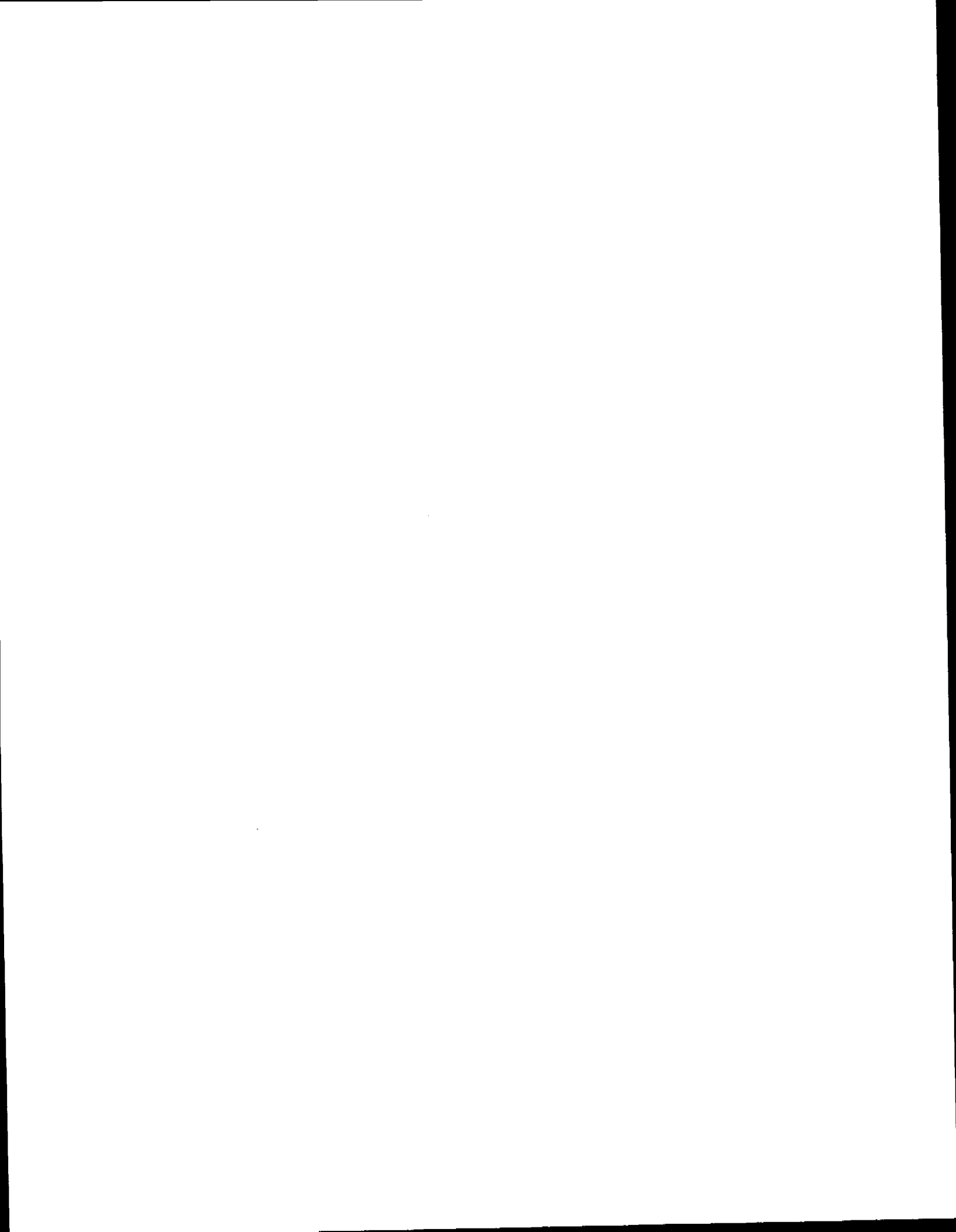
Dated 3-5-09

John Braun  
(Signature of an authorized officer)

John Braun  
(Printed Name)

President  
(Title)

288 1627



2010

ANNUAL REPORT DOMESTIC

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

Please Type or Print Clearly in Ink

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

FILE DATE 03/03/10
RECEIPT NO 2004402
RECEIVED
MAR 03 2010
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DF014134 FEB/2009
BRAUN FARMS, INC.
BRAUN, GERALD
PO BOX 48
WARNER SD 57479-0048

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.

3 west MAIN street WARNER SD 57479-0048
Street Address City State ZIP+4
P.O. Box 48 WARNER S.D. 57479-0048
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent JOHN BRAUN

3 west MAIN street WARNER S.D. 57479-0048
Street Address (Required to be a South Dakota Address) City State ZIP+4
P.O. Box 48 WARNER S.D. 57479-0048
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.

- John BRAUN 3west MAIN street WARNER SD 57479-0048
President Street Address City State ZIP+4
Paula BRAUN 3west MAIN street WARNER SD 57479-0048
Secretary Street Address City State ZIP+4
Paula BRAUN 3west MAIN street WARNER SD 57479-0048
Treasurer Street Address City State ZIP+4
Director
Director

Dated 3-1-2010

(Signature of an authorized officer)
John BRAUN
(Printed Name)
President
(Title)

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

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

Please Type or Print Clearly in Ink

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

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

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

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

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

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

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

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

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

5. If the address has changed, its new address

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

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

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

Dated \_\_\_\_\_

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

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

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

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 03/03/10  
RECEIPT NO  
**RECEIVED**  
**MAR 03 2010**  
**S.D. SEC. OF STATE**

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

1. Corporate ID, Name and Address:



DF014134 FEB/2009  
BRAUN FARMS, INC.  
BRAUN, GERALD  
PO BOX 48  
WARNER SD 57479-0048

2. The name of the South Dakota Registered Agent John BRAUN

3 West MAIN Street WARNER S.D. 57479-0048  
Street Address (Required to be a South Dakota Address) City State ZIP+4  
P.O. Box 48 WARNER SD 57479-0048  
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

4. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The <b>NUMBER OF SHARES</b> 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>340,000</u>
<b>Authorized Farm Corporation</b>	The <b>PERCENTAGE</b> of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	

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

Name	Address	City	State	Zip	Shares	Kindred

Dated 3-1-2010

[Signature]  
(Signature of an authorized officer)  
John Braun  
(Printed Name)  
President  
(Title)



2011

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 01/20/11  
 RECEIPT NO 2113878  
**RECEIVED**  
**JAN 20 2011**  
**S.D. SEC. OF STATE**

1. Corporate Name, Registered Agent Name and Address:



\* D F 0 1 4 1 3 4 \*  
DF014134 FEB/2010  
BRAUN FARMS, INC.  
BRAUN, GERALD  
PO BOX 48  
WARNER SD 57479-0048

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.

<u>3 west main street</u>	<u>WARNER</u>	<u>SD</u>	<u>57479-0048</u>
Street Address	City	State	ZIP+4
<u>P.O. Box 48</u>	<u>WARNER</u>	<u>SD</u>	<u>57479-0048</u>
Mailing Address (Optional)	City	State	ZIP+4

4. The name of the South Dakota Registered Agent John BRAUN


<u>3 west MAIN street</u>	<u>WARNER</u>	<u>SD</u>	<u>57479-0048</u>
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
<u>P.O. Box 48</u>	<u>WARNER</u>	<u>S.D.</u>	<u>57479-0048</u>
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 checked="" type="checkbox"/> | <u>John BRAUN</u>  | <u>3 west main street</u> | <u>WARNER</u> | <u>SD</u>   | <u>57479-0048</u> |
|                                     | President          | Street Address            | City          | State       | ZIP+4             |
| <input type="checkbox"/>            |                    |                           |               |             |                   |
|                                     | Vice President     | Street Address            | City          | State       | ZIP+4             |
| <input checked="" type="checkbox"/> | <u>Paula BRAUN</u> | <u>3 west MAIN street</u> | <u>WARNER</u> | <u>S.D.</u> | <u>57479-0048</u> |
|                                     | Secretary          | Street Address            | City          | State       | ZIP+4             |
| <input checked="" type="checkbox"/> | <u>Paula BRAUN</u> | <u>3 west MAIN street</u> | <u>WARNER</u> | <u>S.D.</u> | <u>57479-0048</u> |
|                                     | Treasurer          | Street Address            | City          | State       | ZIP+4             |
| <input type="checkbox"/>            |                    |                           |               |             |                   |
|                                     | Director           | Street Address            | City          | State       | ZIP+4             |
| <input type="checkbox"/>            |                    |                           |               |             |                   |
|                                     | Director           | Street Address            | City          | State       | ZIP+4             |

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

Dated 1-19-11

  
 (Signature of an Authorized Person)  
John BRAUN  
 (Printed Name)

315 2050

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	City	State	ZIP+4
-----------------	------	-------	-------

5. If the address has changed, its new 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
---	------	-------	-------

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)

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 01/20/11

RECEIPT NO.

**RECEIVED**

**JAN 20 2011**

**S.D. SEC. OF STATE**

1. Corporate ID, Name and Address:



DF014134 FEB/2010  
BRAUN FARMS, INC.  
BRAUN, GERALD  
PO BOX 48  
WARNER SD 57479-0048

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

FAX # \_\_\_\_\_

FILING DATE: To be filed with the Annual Report.

2. The name of the South Dakota Registered Agent John BRAUN

3 west MAIN street WARNER S.D. 57479-0048  
Street Address or Rural Route Box Number in This State and City State ZIP+4

P.O. Box 48 WARNER S.D. 57479-0048  
Mailing Address in This State, if Different from Street 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

4. Please complete the appropriate section:

<b>Family Farm Corporation</b>	The <b>NUMBER OF SHARES</b> 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>340,000</u>
<b>Authorized Farm Corporation</b>	The <b>PERCENTAGE</b> of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	_____ %

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

Name	Address	City	State	Zip	Shares

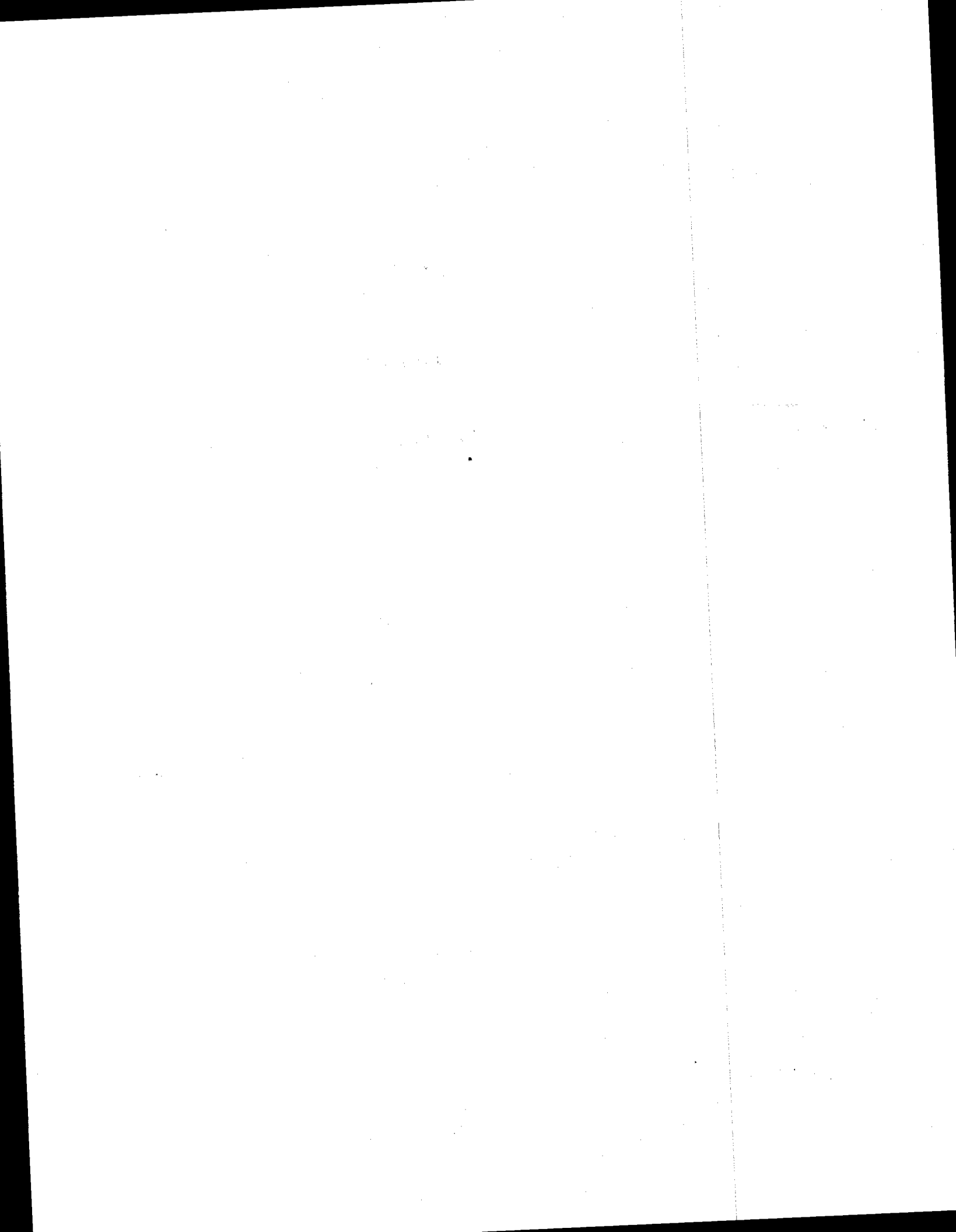
No person may execute this report knowing it is false in any material respect. Any violation is subject to a civil penalty.

Dated 1-19-2011

John Braun  
(Signature of an Authorized Person)

John BRAUN  
(Printed Name)

315 2051



2012

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  
Corporation

**FILING FEE: \$10.00** Please Type or Print Clearly In Ink  
Make check payable to SECRETARY OF STATE

FILE DATE 03/29/2012

RECEIPT NO 32438

1. Corporate Name and Address:

DF014134  
BRAUN FARMS, INC.  
3 WEST MAIN STREET  
WARNER, SD 57479-0048

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: GERALD BRAUN

<u>3 WEST MAIN STREET</u>	<u>WARNER</u>	<u>SD</u>	<u>57479</u>
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
<u>PO BOX 48</u>	<u>WARNER</u>	<u>SD</u>	<u>57479-0048</u>
Mailing Address in This State, if Different from Street Address	City	State	ZIP+4

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

New Agent Name: JOHN G BRAUN

<u>3 WEST MAIN STREET</u>	<u>WARNER</u>	<u>SD</u>	<u>57479-0048</u>
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
<u>PO BOX 48</u>	<u>WARNER</u>	<u>SD</u>	<u>57479-0048</u>
Mailing Address in This State, if Different from 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 03/29/2012

Signature Accepted Electronically  
(Signature of an Authorized Person)

STACY K TUSZKA  
(Printed Name)

2012

Enter Filing Year

## ANNUAL FARM REPORT

FILE DATE 03/29/2012

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 32438

## 1. Corporate Name and Address:

DF014134  
 BRAUN FARMS, INC.  
 3 WEST MAIN STREET  
 WARNER, SD 57479-0048

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

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

3 WEST MAIN STREET	WARNER	SD	57479-0048
Street Address	City	State	ZIP+4
PO BOX 48	WARNER	SD	57479-0048
Mailing Address	City	State	ZIP+4

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

Agent Name: JOHN G BRAUN

3 WEST MAIN STREET	WARNER	SD	57479-0048
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
PO BOX 48	WARNER	SD	57479-0048
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 checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
	President	Street Address	City	State	ZIP+4
<input checked="" type="checkbox"/>	PAULA J BRAUN	PO BOX 48	WARNER	SD	57479
	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
	Director	Street Address	City	State	ZIP+4

## 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.

County	Section	Tow nship	Acres
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## 7. Please complete the appropriate section:

<b>Family Farm Corporation</b>	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)	340,000.00
<b>Authorized Farm Corporation</b>	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	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)

---

STACY K TUSZKA  
(Printed Name)

---

2013

Enter Filing Year

## ANNUAL FARM REPORT

FILE 2/4/2013

RECEIPT NO 92956

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:

DF014134  
BRAUN FARMS, INC.  
3 WEST MAIN STREET  
WARNER, SD 57479

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

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

3 WEST MAIN STREET	WARNER	SD	57479
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Street Address	City	State	ZIP+4
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PO BOX 48	WARNER	SD	57479
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Mailing Address	City	State	ZIP+4
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## 4. The name of the South Dakota Registered Agent

Agent Name: JOHN G BRAUN

3 WEST MAIN STREET	WARNER	SD	57479-0048
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Street Address or Rural Route Box Number in This State and	City	State	ZIP+4
--	------	-------	-------

PO BOX 48	WARNER	SD	57479-0048
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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 checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
-------------------------------------	--------------	-----------	--------	----	-------

President	Street Address	City	State	ZIP+4
-----------	----------------	------	-------	-------

<input checked="" type="checkbox"/>	PAULA J BRAUN	PO BOX 48	WARNER	SD	57479
-------------------------------------	---------------	-----------	--------	----	-------

Vice President	Street Address	City	State	ZIP+4
----------------	----------------	------	-------	-------

<input type="checkbox"/>					
--------------------------	--	--	--	--	--

Secretary	Street Address	City	State	ZIP+4
-----------	----------------	------	-------	-------

<input type="checkbox"/>					
--------------------------	--	--	--	--	--

Treasurer	Street Address	City	State	ZIP+4
-----------	----------------	------	-------	-------

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

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

<b>Family Farm Corporation</b>	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>340000</u>
<b>Authorized Farm</b>	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>                    </u>

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

Name	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. 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)  
**STACY K TUSZKA**  
\_\_\_\_\_  
(Printed Name)

2014

Enter Filing Year

## ANNUAL FARM REPORT

FILE 2/5/2014

RECEIPT NO 175125

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:

DF014134  
BRAUN FARMS, INC.  
3 WEST MAIN STREET  
WARNER, SD 57479

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

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

3 WEST MAIN STREET	WARNER	SD	57479
--------------------	--------	----	-------

Street Address	City	State	ZIP+4
----------------	------	-------	-------

PO BOX 48	WARNER	SD	57479
-----------	--------	----	-------

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

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

Agent Name: JOHN G BRAUN

3 WEST MAIN STREET	WARNER	SD	57479-0048
--------------------	--------	----	------------

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

PO BOX 48	WARNER	SD	57479-0048
-----------	--------	----	------------

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 checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
	President	Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	PAULA J BRAUN	PO BOX 48	WARNER	SD	57479
	Vice President	Street Address	City	State	ZIP+4

<input type="checkbox"/>	STACY TUSZKA	PO BOX 48	WARNER	SD	57479
	Secretary	Street Address	City	State	ZIP+4

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

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

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

## 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:

<b>Family Farm Corporation</b>	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>340000</u>
<b>Authorized Farm</b>	The PERCENTAGE of gross receipts of the corporation derived from rent, royalties, dividends, interest and annuities.	<u>                    </u>

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

Name	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. 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)

**STACY TUSZKA**

(Printed Name)

2015

Enter Filing Year

## ANNUAL FARM REPORT

FILE DATE 2/3/2015

RECEIPT NO 269025

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:

DF014134  
BRAUN FARMS, INC.  
3 WEST MAIN STREET  
WARNER, SD 57479

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

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

3 WEST MAIN STREET	WARNER	SD	57479
--------------------	--------	----	-------

Street Address	City	State	ZIP+4
----------------	------	-------	-------

PO BOX 48	WARNER	SD	57479
-----------	--------	----	-------

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

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

Agent Name: JOHN G BRAUN

3 WEST MAIN STREET	WARNER	SD	57479-0048
--------------------	--------	----	------------

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

PO BOX 48	WARNER	SD	57479-0048
-----------	--------	----	------------

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 checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
-------------------------------------	--------------	-----------	--------	----	-------

President	Street Address	City	State	ZIP+4
-----------	----------------	------	-------	-------

<input checked="" type="checkbox"/>	PAULA J BRAUN	PO BOX 48	WARNER	SD	57479
-------------------------------------	---------------	-----------	--------	----	-------

Vice President	Street Address	City	State	ZIP+4
----------------	----------------	------	-------	-------

<input type="checkbox"/>	STACY TUSZKA	PO BOX 48	WARNER	SD	57479
--------------------------	--------------	-----------	--------	----	-------

Secretary	Street Address	City	State	ZIP+4
-----------	----------------	------	-------	-------

<input type="checkbox"/>					
--------------------------	--	--	--	--	--

Treasurer	Street Address	City	State	ZIP+4
-----------	----------------	------	-------	-------

<input type="checkbox"/>					
--------------------------	--	--	--	--	--

Director	Street Address	City	State	ZIP+4
----------	----------------	------	-------	-------

<input type="checkbox"/>					
--------------------------	--	--	--	--	--

Director	Street Address	City	State	ZIP+4
----------	----------------	------	-------	-------

## 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.



2016

## ANNUAL FARM REPORT

FILE DATE 1/21/2016

Enter Filing Year

## Corporation

RECEIPT NO 373350

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

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

Please Type or Print Clearly In Ink

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

## 1. Corporate ID and Name:

DF014134

Enter Corporate ID

BRAUN FARMS, INC.

Enter Corporate Name

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

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

3 WEST MAIN STREET

WARNER

SD

57479

Actual Street Address or Rural Route Box Number

City

State

ZIP+4

PO BOX 48

WARNER

SD

57479

Mailing Address, if Different from Street Address

City

State

ZIP+4

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

Agent Name:

JOHN G BRAUN

3 WEST MAIN STREET

WARNER

SD

57479-0048

Actual Street Address or Rural Route Box Number in This State

City

State

ZIP+4

PO BOX 48

WARNER

SD

57479-0048

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 checked="" type="checkbox"/>	JOHN G BRAUN	PO BOX 48	WARNER	SD	57479
	President	Actual Street Address	City	State	ZIP+4

<input checked="" type="checkbox"/>	PAULA J BRAUN	PO BOX 48	WARNER	SD	57479
	Vice President	Actual Street Address	City	State	ZIP+4

<input type="checkbox"/>	STACY TUSZKA	PO BOX 48	WARNER	SD	57479
	Secretary	Actual Street Address	City	State	ZIP+4

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

Director Actual Street Address City State ZIP+4

Director Actual 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:

<b>Family Farm Corporation</b>	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)	340000
<b>Authorized Farm Corporation</b>	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 (SDCL 47-1A-129).

Dated 01/21/2016

Signature Accepted Electronically

(Signature of an Authorized Person)

STACY K TUSZKA

(Printed Name)