

State of South Dakota



OFFICE OF THE SECRETARY OF STATE

CERTIFICATE OF INCORPORATION

BUSINESS CORPORATION

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

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



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of South Dakota, at Pierre, the Capital, this January 19, 1996.

JOYCE HAZELTINE
Secretary of State

9000 K

Filed this 19th day of Jan 1936

ARTICLES OF INCORPORATION

Executed by the undersigned for the purpose of forming a South Dakota Corporation under SDCL Ch. 47-2.

ARTICLE I.

The name of the Corporation shall be Action Realty, Inc.

ARTICLE II.

The purpose shall be to conduct general real estate commission and broker's business.

In addition, the Corporation shall be empowered to purchase, receive by way of gift, invest in, and in all other ways acquire, lease, possess, maintain, handle on consignment, own, hold for investment or otherwise use, operate, manage, conduct, perform, make, borrow, guarantee, contract in respect of, trade and deal in, sell, exchange, lease, mortgage, deed, hypothecate, encumber, and in all other ways dispose of, market and deal in, and with, property of every kind and character, real, personal or mixed, tangible or intangible, wherever situated and however held, including but not limited to, money, choses and action, securities, stocks, bonds, mortgages, notes, commercial paper, and other obligations and evidences of interest in or indebtedness of any person, firm, or corporation. To serve as director or resident agent of any foreign or domestic corporation, and to serve as attorney in fact for, and in behalf of, any land owners with any government agency, or subdivision thereof, and any interest

RECEIVED

JAN 12 1936

S.D. SEC. OF STATE RECEIVED

JAN 13 1936

S.D. SEC. OF STATE



UNCLASSIFIED

UNCLASSIFIED
DATE 01/15/03
BY SP-6/BJD

in, or part of, any of the forgoing, and to exercise in respect thereof all of the rights, powers, privileges, and immunities of individual owners or holders thereof.

To hire and employ agents, servants, and employees, and to enter into agreements of employment and to act as agent, trustee, or otherwise, either alone or in company with others.

To promote or aid in any manner, financially or otherwise, any person firm, association, or corporation, and to guarantee contracts and other obligations.

To make, perform, and carry out, contracts and arrangements of every kind and character with any persons, firm, association, or corporation, or any government or authority or subdivision of agency thereof.

To carry on any business whatsoever that this Corporation may deem property or convenient in connection with any of the foregoing purposes or otherwise, or that it may deem calculated, directly or indirectly, to improve the interests of this Corporation, and to do all things specified in SDCL Ch. 47-2, as such statute is now in effect or any at any time hereafter be amended, and to do any and all things hereinabove set forth to the same extent and as fully as natural persons might or could do, either alone or in connection with other persons, firms, associations, or corporations.

The foregoing statement of both purposes and powers, shall be liberally construed in aid of the powers of this

Corporation, and the powers and purposes stated in each clause shall, except where otherwise stated, be in nowise limited or restricted by any term or provision of any other clause, and shall be regarded not only as independent purposes, but the purposes and powers stated shall be construed distributively as each object expressed, and the enumeration as to specific powers shall not be construed as to limit in any manner the aforesaid general powers, but are in furtherance of, and in addition to and not in limitation of said general powers.

There will be one class of stock, to-wit, common stock, issued by this Corporation, without preference, limitation or other designation.

ARTICLE III.

The number of shares of which it shall have authority to issue, itemized by class, par value or shares without par value, and series within a class is:

Class	Series	Number of authorized shares	Per share par value or without value.
Common Stock only	Numbered 1 to 50	50	Without par value

ARTICLE IV.

The Corporation will not commence business until consideration of value of at least One Thousand Dollars (\$1,000.00) has been received for issuance of shares.

ARTICLE V.

Address of registered office is Centre Plaza, Suite 5,
289 Dakota Avenue S., Huron, South Dakota 57350.

ARTICLE VI.

Name of initial registered agent at such address is
Douglas G. Fosheim.

ARTICLE VII.

The number of directors constituting the initial board
of directors shall be three; and the names and addresses of
the directors are as follows:

Roger Chase	R.R.5 Box 158, Huron, South Dakota 57350
Michelle L. Chase	R.R.5 Box 158, Huron, South Dakota 57350
Shirley Chase	R.R.5, Huron, South Dakota 57350

ARTICLE VIII.

The names and addresses of incorporators are:

Roger Chase	R.R.5 Box 158, Huron, South Dakota 57350
Michelle L. Chase	R.R.5 Box 158, Huron, South Dakota 57350
Shirley Chase	R.R.5, Huron, South Dakota 57350

ARTICLE IX.

The authorized capital stock is One Hundred Thousand
Dollars (\$100,000.00).

ARTICLE X.

These Articles may be amended in the manner authorized
by law and the By-Laws of this Corporation at the time of
amendment.

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

96002740359
2/21/96


RECEIVED
JAN 19 1996
S.D. SEC. OF STATE

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

I, Douglas G. Fosheim, hereby give my
(name of the registered agent)

consent to serve as the registered agent for _____
Action Realty, Inc.
(corporate name)

Dated January 11, 1996


(signature of registered agent)

*** Submit one original and one copy ***

NON-PROFIT CORPORATION

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

FILE DATE 2-4-97
RECEIPT NO 5412

FILING FEE \$10 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

1 Corporate Name, Registered Agent and Registered Address

DB 036733 JAN/00
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
CENTRE PLAZA, STE 5
289 DAKOTA AVE S
HURON, SD 57350 1939

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

***** 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 is to conduct general real estate commission and broker's business

3 The names and addresses of its directors and officers

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP + 4
<u>Roger Chase</u>	<u>President</u>	<u>RR 5, Box 148</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
<u>Michelle L. Chase</u>	<u>Vice President</u>	<u>RR 5, Box 148</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
<u>Shirley Chase</u>	<u>Secretary</u>	<u>RR 5</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
<u>Shirley Chase</u>	<u>Treasurer</u>	<u>RR 5</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>

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, identified 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

50

Common

~~Common~~
No Par Value

5 NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

25

Common

6 The amount of its stated capital is \$ 2,500.00 (Money received for issued shares)

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

Dated 2/3 : 1997

Roger Chase

(Signature)
is President
(Title)

STATE OF South Dakota
COUNTY OF Beadle

I, Sharon L. Kearns, a notary public, do hereby certify that on the 3rd day of January, 1997,

personally appeared before me Roger Chase who, being by me first duly sworn, declared that he ~~is~~ is the President of Action Realty, Inc.

that he ~~has~~ signed the foregoing document as officer of the corporation and the statements therein contained are true.
My Commission Expires March 18, 1999.

Sharon L. Kearns
Notary Public

(Notary 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)

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 2/20/98
 RECEIVED NO. 690323
 FEB 20 1998
 FEB 09 1998
 SEC. OF STATE
 SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB-036733 JAN/97
 ACTION REALTY, INC.
 FOSHEIM, DOUGLAS G.
 CENTRE PLAZA, STE 5
 289 DAKOTA AVE S
 HGRON, SD 57350-1939

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.

***** 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 5, 1998

By Roger D. Chase
 (Signature)
 Its President
 (Title)

STATE OF South Dakota
 COUNTY OF Beadle ss

I, Sharon L. Kearns, a notary public, do hereby certify that on this 5th day of February, 1998, personally appeared before me Roger Chase, President of Action Realty, Inc. who, being by me first duly sworn, declared that he/she is the

that he/she signed the foregoing document as officer of the corporation, and the statements therein contained are true
 My Commission Expires March 18, 1999.

Sharon L. Kearns
 Notary Public
 Sharon L. Kearns

(Notarial Seal)

SDS CRP 6/97

SECRETARY OF STATE
STATE CAPITOL
600 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)

<u>CONSENT OF APPOINTMENT BY THE REGISTERED AGENT</u>	
I, _____, hereby give my consent to serve as the	
(name of registered agent)	
registered agent for _____	
(corporate name)	
Dated _____ 19 _____	_____
	(signature)

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 1-27-99
RECEIPT NO. 771054

RECEIVED

JAN 27 1999

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB-036733
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
CENTRE PLAZA, STE 5
289 DAKOTA AVE S
HURON, SD 57350-1939

JAN/98

Telephone # _____

FAX # _____

Federal Taxpayer IC _____

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

*** ATTENTION - FILING INSTRUCTIONS ***

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

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

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

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

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

SD law requires at least one director.

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

Director _____
Director _____

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

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated January 26, 19 99

By Roger Chase
(Signature)

Its President
(Title)

STATE OF South Dakota ss
COUNTY OF Beadle

I, Sharon L. Kearns, a notary public, do hereby certify that on this 26th day of January, 19 99, personally appeared before me Roger Chase, who, being by me first duly sworn, declared that he/~~she~~ is the President of Action Realty, 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 March 18, 1999.

Sharon L. Kearns
Notary Public
Sharon L. Kearns

(Notarial Seal)

SOS CRP 6/98

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 _____ 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)

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**

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FILING FEE: \$10 in addition to annual report fee

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_____ ZIP + 4 _____
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_____ 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
PIERRE, S.D. 57501-8077
605-773-4845

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

File Date _____
Receipt No. _____

FILING FEE: \$10 in addition to annual report fee

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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)

045112112020

2002

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: \$35 MAKE CHECK PAYABLE TO SECRETARY OF STATE
ADDITIONAL PENALTY FEE OF \$50 APPLIES TO ALL LATE FILINGS

0202212.1540

FILE DATE 1-2-02
RECEIPT NO. 1650005

RECEIVED

DEC 17 '01

S.D. SEC. OF STATE

1. Corporate Name, Registered Agent and Registered Address:

DB-036733 JAN/2001
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
CENTRE PLAZA, STE 5
289 DAKOTA AVE S
HURON SD 57350-1939

Telephone # _____

FAX # _____

Federal Taxpayer # _____

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

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

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

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

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

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

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

SD law requires at least one director.

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

Director _____
Director _____

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

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated December 13, 2001

By Roger Chase
(Signature)

Its President
(Title)

STATE OF South Dakota ss
COUNTY OF Beadle

On this the 13th day of December, 20 01, before me, Sharon L. Kearns

personally appeared Roger Chase, 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 March 18, 2005

Sharon L. Kearns
Notary Public
Sharon L. Kearns

(Notarial Seal)

SOS CRP 11/01

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

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

File Date _____
Receipt No. _____

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

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

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

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

Dated _____

(Signature)

(Title)

STATE OF _____ ss
COUNTY OF _____

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

My Commission Expires _____

Notary Public

(Notarial Seal)

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

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

(signature)

2003

ANNUAL REPORT


0301218.3564
1/30/03

FILE DATE 1-2-03
RECEIPT NO 1172412
RECEIVED
DEC 23 02

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

1. Corporate Name, Registered Agent and Registered Address:


08-036733 JAN/2002
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
CENTRE PLAZA, STE 5
289 DAKOTA AVE S
HURON SD 57350-1939

S.D. SEC. OF STATE
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.

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

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

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

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

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

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

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

4. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class:
NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ _____ (Money received for issued shares)

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

Dated December 20, 2002 By Roger Chase
(Signature)
Its President
(Title)

STATE OF South Dakota ss
COUNTY OF Beadle

On this the 20th day of December 2002, before me, Sharon L. Kearns
personally appeared Roger Chase, 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 March 18, 2005
Sharon L. Kearns
Notary Public
Sharon L. Kearns
(Notarial Seal)

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

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

File Date _____
Receipt No. _____

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

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

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

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

Dated _____
_____ (Signature)

_____ (Title)

STATE OF _____ ss
COUNTY OF _____

On this the ____ day of _____, 20____, before me, _____, known to me, or proved to me, personally appeared _____, 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)

2004

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 01/02/04
RECEIPT NO. 1278021
RECEIVED
DEC 30 03

1. Corporate Name, Registered Agent and Registered Address:



DB036733 JAN/2003
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
CENTRE PLAZA, STE 5
289 DAKOTA AVE S
HURON SD 57350-1939

Telephone #
FAX #
Federal Taxps
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 below 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

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

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

NUMBER OF SHARES CAN ISSUE (authorized) CLASS SERIES PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES

6. The amount of its stated capital is \$ (Money received for issued shares)

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

Dated December 29, 2003

By Roger Chase (Signature)
Its President (Title)

STATE OF SOUTH DAKOTA ss
COUNTY OF BEADLE

On this the 29th day of December, 2003, before me, Sharon L. Kearns personally appeared Roger Chase, 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 March 18, 2005

Notary Public Signature of Sharon L. Kearns

(Notarial Seal)

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

SOS CRP 07/03

**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)

232 5920 01/21/2005

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

RECEIVED

JAN 19 '05

FILE DATE 1/19/05
 RECEIPT NO. 1398583
RECEIVED
 JAN 12 '05
 S.D. SEC. of STATE

1. Corporate Name, Registered Agent and Registered Address:



DB036733 JAN/2004
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
CENTRE PLAZA, STE 5
289 DAKOTA AVE S
HURON SD 57350-1939

Telephone # _____
FAX # _____
Federal Tax# _____
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 is to conduct general real estate commission and broker's business

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

NAME	OFFICE	STREET ADDRESS	CITY	STATE	ZIP+4
<u>Roger Chase</u>	<u>President</u>	<u>20451 398th Avenue</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
<u>Michelle L. Chase</u>	<u>Vice President</u>	<u>20451 398th Avenue</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
<u>Shirley Chase</u>	<u>Secretary</u>	<u>2265 West Park Ave. N.W.</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
<u>Shirley Chase</u>	<u>Treasurer</u>	<u>2265 West Park Ave. N.W.</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>

SD law requires at least one director.

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

Director _____
Director _____

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

NUMBER OF SHARES CAN ISSUE (authorized)	CLASS	SERIES	PAR VALUE OR STATE THAT SHARES ARE NO PAR VALUE
<u>50</u>		<u>Common</u>	<u>\$1.00 per share</u>

5. NUMBER OF SHARES ACTUALLY ISSUED CLASS SERIES
25 Common

6. The amount of its stated capital is \$ 2,500.00 . (Money received for issued shares)

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

Dated January 10, 2005

Roger D Chase
(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 Action Realty, Inc.
2. The previous street address, or a statement that there is no street address, of its registered office _____
Centre Plaza, Suite 5, 289 Dakota Ave. S., Huron, SD ZIP + 4 57350-1939
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. _____
239 Wisconsin Avenue S.W., #203, Huron, SD ZIP + 4 57350-1941
4. The name of its previous registered agent is Douglas G. Fosheim
5. The name of its successor registered agent is * N/A

***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 January 10, 2005

Roger Chase
(Signature)

President
(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)

**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)

**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)

2008

ANNUAL REPORT

DOMESTIC
PLEASE TYPE OR USE BLACK INK

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

FILE DATE 01/07/08
RECEIPT NO. 1750667
RECEIVED
JAN 07 2008
S.D. SEC. OF STATE

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



DB036733 JAN/2007
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
239 WISCONSIN AVE SW #203
HURON SD 57350-1941

Telephone #
FAX #

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

ATTENTION - FILING INSTRUCTIONS

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

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

2. The address of the principal office

Table with 5 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.

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

Table with 3 columns: NUMBER OF AUTHORIZED SHARES, CLASS, SERIES

Table with 3 columns: NUMBER OF ISSUED SHARES, CLASS, SERIES

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

Dated January 2, 2008

Signature: Roger Chase

Printed Name: Roger Chase

Title: President

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

File Date _____
Receipt No. _____

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

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

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

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

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

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

Dated _____

Signature

Printed Name

Title

CONSENT OF APPOINTMENT BY THE REGISTERED AGENT

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

Dated _____

(signature)

287 0894 03/11/2009

2009

ANNUAL REPORT DOMESTIC

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

Please Type or Print Clearly in Ink

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

RECEIVED stamp with date 03/03/09, 1885916, FEB 06 2009, S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



DB036733 JAN/2008
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
239 WISCONSIN AVE SW #203
HURON SD 57350-1941

RECEIVED
MAR 03 2009
S.D. SEC. OF STATE

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.

1640 Dakota Avenue S. Huron SD 57350
Street Address City State ZIP+4
Mailing Address (Optional) City State ZIP+4

3. The name of the South Dakota Registered Agent Douglas G. Fosheim, 239 Wisconsin Ave. S.W.,

#203, Huron, SD 57350
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

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.

Table with columns: Name, Title, Street Address, City, State, ZIP+4. Includes Roger Chase (President), Michelle L. Chase (Vice President), Shirley Chase (Secretary), and Shirley Chase (Treasurer).

Dated Feb. 4, 2009

Signature of Roger Chase
(Signature of an authorized officer)
Roger Chase
(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)

2010

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

ANNUAL REPORT
DOMESTIC

Please Type or Print Clearly in Ink

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

FILE DATE	<u>01/08/10</u>
RECEIPT NO	<u>1985820</u>
RECEIVED	
JAN 08 2010	
D.D. SEC. OF STATE	

1. Corporate Name, Registered Agent Name and Address:



DB036733
DB036733 JAN/2009
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
239 WISCONSIN AVE SW #203
HURON SD 57350-1941

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.

<u>1640 Dakota Avenue S.</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
Street Address	City	State	ZIP+4
Mailing Address (Optional)	City	State	ZIP+4

3. The name of the South Dakota Registered Agent Douglas G. Fosheim, 239 Wisconsin Ave. S.W.,

<u>#203</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
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

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"/>	<u>Roger Chase</u>	<u>20451 298th Avenue</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
President	Street Address	City	State	ZIP+4	
<input checked="" type="checkbox"/>	<u>Michelle L. Chase</u>	<u>20451 298th Avenue</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
Vice President	Street Address	City	State	ZIP+4	
<input checked="" type="checkbox"/>	<u>Shirley Chase</u>	<u>2265 West Park Ave. N.W.</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
Secretary	Street Address	City	State	ZIP+4	
<input type="checkbox"/>	<u>Shirley Chase</u>	<u>2265 West Park Ave. N.W.</u>	<u>Huron</u>	<u>SD</u>	<u>57350</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

Dated January 5, 2010

Roger Chase
(Signature of an authorized officer)

Roger Chase
(Printed Name)

President
(Title)

300 0676 9290 002

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)

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 01/27/11
 RECEIPT NO 2116843
RECEIVED
JAN 27 2011
S.D. SEC. OF STATE

1. Corporate Name, Registered Agent Name and Address:



* D B O 3 6 7 3 3 *
DB036733 JAN/2010
ACTION REALTY, INC.
FOSHEIM, DOUGLAS G.
239 WISCONSIN AVE SW #203
HURON SD 57350-1941

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>1640 Dakota Avenue S.</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
Street Address	City	State	ZIP+4

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

4. The name of the South Dakota Registered Agent Douglas G. Fosheim

<u>239 Wisconsin Avenue S.W., #203</u>	<u>Huron</u>	<u>SD</u>	<u>57350</u>
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

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

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

- | | | | | | |
|-------------------------------------|--------------------------|---------------------------------|--------------|-----------|--------------|
| <input checked="" type="checkbox"/> | <u>Roger Chase</u> | <u>20451 298th Avenue</u> | <u>Huron</u> | <u>SD</u> | <u>57350</u> |
| | President | Street Address | City | State | ZIP+4 |
| <input checked="" type="checkbox"/> | <u>Michelle L. Chase</u> | <u>20451 298th Avenue</u> | <u>Huron</u> | <u>SD</u> | <u>57350</u> |
| | Vice President | Street Address | City | State | ZIP+4 |
| <input checked="" type="checkbox"/> | <u>Shirley Chase</u> | <u>2265 West Park Ave. N.W.</u> | <u>Huron</u> | <u>SD</u> | <u>57350</u> |
| | Secretary | Street Address | City | State | ZIP+4 |
| <input type="checkbox"/> | <u>Shirley Chase</u> | <u>2265 West Park Ave. N.W.</u> | <u>Huron</u> | <u>SD</u> | <u>57350</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 January 25, 2011

Roger Chase
 (Signature of an Authorized Person)
Roger Chase
 (Printed Name)

315 3299

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)

2012

Enter Filing Year

ANNUAL REPORT

FILE DATE 03/01/2012

RECEIPT NO 26040

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

DOMESTIC

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

1. Corporate ID and Name:
DB036733
ACTION REALTY, INC.
1640 DAKOTA AVE S
HURON, SD 57350-4023

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

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

1640 DAKOTA AVE S HURON SD 57350-4023
Street Address City State ZIP+4

Mailing Address City State ZIP+4

4. The name of the South Dakota Registered Agent

Agent Name: DOUGLAS G. FOSHEIM

239 WISCONSIN AVE SW #203 HURON SD 57350-1941
Street Address or Rural Route Box Number in This State and City State ZIP+4

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

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

[X] ROGER CHASE 20451 398TH AVE HURON SD 57350
President Street Address City State ZIP+4

[X] MICHELLE CHASE 20451 398TH AVE HURON SD 57350
Vice President Street Address City State ZIP+4

[X] SHIRLEY CHASE 2265 WEST PARK HURON SD 57350
Secretary Street Address City State ZIP+4

[] SHIRLEY CHASE 2265 WEST PARK HURON SD 57350
Treasurer Street Address City State ZIP+4

[] Director Street Address City State ZIP+4

[] Director Street Address City State ZIP+4

No person may execute this report knowing it is false in any material 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 03/01/2012

Signature Accepted Electronically
(Signature of an Authorized Person)

ROGER CHASE
(Printed Name)

2013

Enter Filing Year

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

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

DOMESTIC

Please Type or Print Clearly In Ink

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

FILE 1/2/2014

RECEIPT NO 165138

1. Corporate ID and Name:

DB036733
ACTION REALTY, INC.
1640 DAKOTA AVE S
HURON, SD 57350-4023

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: DOUGLAS G. FOSHEIM

239 WISCONSIN AVE SW #203	HURON	SD	57350-1941
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

Mailing Address in This State, if Different from Street Address	City	State	ZIP+4
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4. If the address has changed, its new address.

New Agent Name: ROGER D CHASE

1640 DAKOTA S	HURON	SD	57350
Street Address or Rural Route Box Number in This State and	City	State	ZIP+4

		SD	20451 398
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.

Date 01/02/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

ROGER D CHASE

(Printed Name)

2013

Enter Filing Year

ANNUAL REPORT

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

DOMESTIC

Please Type or Print Clearly In Ink

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

FILE 1/2/2014

RECEIPT NO 165138

1. Corporate ID and Name:

DB036733
ACTION REALTY, INC.
1640 DAKOTA AVE S
HURON, SD 57350-4023

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

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

1640 DAKOTA AVE S	HURON	SD	57350-4023
Street Address	City	State	ZIP+4

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

4. The name of the South Dakota Registered Agent

Agent Name: ROGER D CHASE

1640 DAKOTA S	HURON	SD	57350
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	SD	20451 398
		State	ZIP+4

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

<input checked="" type="checkbox"/>	ROGER DEAN CHASE	1640 DAKOTA S	HURON	SD	57350
	President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
<input type="checkbox"/>	Vice President	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
<input type="checkbox"/>	Secretary	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
<input type="checkbox"/>	Treasurer	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
<input type="checkbox"/>	Director	Street Address	City	State	ZIP+4
<input type="checkbox"/>					
<input type="checkbox"/>	Director	Street Address	City	State	ZIP+4

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

Date 01/02/2014

Signature Accepted Electronically

(Signature of an Authorized Person)

ROGER D CHASE

(Printed Name)

2014

ANNUAL REPORT

FILE DATE 12/17/2015

Enter Filing Year

DOMESTIC

RECEIPT NO 267533

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:

DB036733

ACTION REALTY, INC.

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

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

1640 DAKOTA AVE S HURON SD 57350-4023

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

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

4. The name of the South Dakota Registered Agent

Agent Name: DOUGLAS G. FOSHEIM

239 WISCONSIN AVE SW #203 HURON SD 57350-1941

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

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

5. The names and business addresses of its principal officers and directors (governors). If, pursuant to SDCL 47-1A-732(1), the board of directors has been eliminated, list the names of the shareholders.

[X] ROGER DEAN CHASE 1640 DAKOTA S HURON SD 57350
President Actual Street Address City State ZIP+4

[] Vice President Actual Street Address City State ZIP+4

[] Secretary Actual Street Address City State ZIP+4

[] Treasurer Actual Street Address City State ZIP+4

Director

Actual Street Address

City

State

ZIP+4

Director

Actual Street Address

City

State

ZIP+4

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

Dated

Signature Accepted Electronically

(Signature of an Authorized Person)

ROGER D CHASE

(Printed Name)

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

12/17/2015 12:10:59 PM