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ANNUAL REPORT

Domestic Nonprofit Corporation
SDCL 47-24-6, 59-11-24

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

2020
FILING YEAR

Please Type or Print Clearly in Ink
Please submit one Original
Make payable to the SECRETARY OF STATE

Filing Fee: \$10

Total Fee: \$10

1. Business ID and Name:

NS008999
BUSINESS ID

RUSHMORE ROUNDUP, INC.
BUSINESS NAME

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

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

Actual Street Address
325 DEADWOOD AVENUE
RAPID CITY, SD 57701

Mailing Address
P.O. BOX 8472
RAPID CITY, SD 57709

4. The South Dakota Registered Agent's Name:

South Dakota law permits the registered agent to be either (a) a noncommercial registered agent, (b) a commercial registered agent, or (c) an office holder.

(a) The South Dakota Noncommercial Registered Agent's name

Name **JEFFREY N NELSEN**

Actual Street Address in this State

1800 KINGS ROAD
RAPID CITY, SD 57702

Mailing Address in this State

5. The names and addresses of its principal officers.

Title	Name	Address
Secretary	Pam Brown	P.O. Box 8472 Rapid City, SD 57709
President	Sam Koedam	Po Box 8472 Rapid City, SD 57709
Treasurer	Kristi Andersen	PO Box 8472 Rapid City, SD 57709

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

Name	Address
Kelli Luxem	P.O. Box 8472 Rapid City, SD 57709
Jeff Nelsen	P.O. Box 8472 Rapid City, SD 57709
Sam Koedam	PO Box 8472 Rapid City, SD 57709

7. Beneficial Owners (optional): A beneficial owner is a person who has or in some manner controls an equity security. Please consult an attorney for legal advice if you have any questions concerning this entry. Any question under this heading is considered a request for legal advice and the secretary of state's office is, by statute, not permitted, to provide legal advice.



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

09/17/2020

Dated

Email (Optional)

Kristi Andersen

Signature of an Authorized Person

Kristi Andersen

Printed Name

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