

John R. Ashcroft Secretary of State
2023-2024 BIENNIAL REGISTRATION REPORT
NONPROFIT

N00062283
Date Filed: 6/22/2023
John R. Ashcroft
Missouri Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

* SECTION 1, 3 & 4 ARE REQUIRED

REPORT DUE BY: 8/31/2023

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
1240 KONERT VALLEY DR
FENTON MO 63026

ORGANIZED UNDER THE LAWS OF:
Missouri

1 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: *
118 E Maple St (Required)
PO Box 509
STREET
Pilot Knob MO 63663-1001
CITY/ STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
 The new registered agent
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
 The new registered office address
Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

3 OFFICERS BOARD OF DIRECTORS *
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST PRESIDENT AND SECRETARY BELOW A NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW B
PRESIDENT Warren, Carl
STREET 1054 Tyler Tri
CITY/STATE/ZIP Farmington MO 63640-8587
SECRETARY Busch, Walter E
STREET 1240 Konert Valley Dr
CITY/STATE/ZIP Fenton MO 63026
VICE PRESIDENT Cadenbach, Charles T
STREET 14350 County Rd #8450
CITY/STATE/ZIP Rolla MO 65401
TREASURER Busch, Walter E
STREET 1240 Konert Valley Dr
CITY/STATE/ZIP Fenton MO 63026
NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable. *
Authorized party or officer sign here Walter Erich Busch (Required)
Please print name and title of signer: Walter Erich Busch / Secretary
NAME TITLE

REGISTRATION REPORT FEE IS:
__ \$20.00 if filed on or before 8/31/2023
__ \$25.00 if filed after 9/30/2023
Corporation will be administratively dissolved if report is not filed by 11/29/2025

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
E-MAIL ADDRESS (OPTIONAL): _____

John R. Ashcroft Secretary of State
 2021-2022 BIENNIAL REGISTRATION REPORT
 NONPROFIT

N00062283
Date Filed: 8/19/2021
John R. Ashcroft
Missouri Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

* SECTION 1, 3 & 4 ARE REQUIRED

REPORT DUE BY: 8/31/2021

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
1240 KONERT VALLEY DR
FENTON MO 63026

ORGANIZED UNDER THE LAWS OF:
Missouri

1 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: *
 118 East Maple (Box 509) (Required)
 STREET
Pilot Knob MO 63663
 CITY / STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
 The new registered agent _____
 IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
 The new registered office address _____
Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

<p>3 OFFICERS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST PRESIDENT AND SECRETARY BELOW</u> A</p> <p><u>PRESIDENT</u> Warren, Carl STREET 1054 Tyler Trl CITY/STATE/ZIP <u>Farmington MO 63640-8587</u></p> <p><u>SECRETARY</u> Busch, Walter E STREET 1240 Konert Valley Dr CITY/STATE/ZIP <u>Fenton MO 63026</u></p> <p><u>VICE PRESIDENT</u> Cadenbach, Charles T STREET 14350 County Rd #8450 CITY/STATE/ZIP <u>Rolla MO 65401</u></p> <p><u>TREASURER</u> Busch, Walter E STREET 1240 Konert Valley Dr CITY/STATE/ZIP <u>Fenton MO 63026</u></p>	<p>3 BOARD OF DIRECTORS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST THREE DIRECTORS BELOW</u> B</p> <p><u>NAME</u> Aubuchon, Robert Debroah STREET 8862 D Rd CITY/STATE/ZIP <u>Waterloo IL 62298-5324</u></p> <p><u>NAME</u> Schulte, Stephen STREET 120 South Main St CITY/STATE/ZIP <u>Ironton MO 63650</u></p> <p><u>NAME</u> Killen, R Scott STREET 118 E Maple St #509 CITY/STATE/ZIP <u>Pilot Knob MO 63663</u></p>
--	---

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable. *

Authorized party or officer sign here Walter E Busch (Required)

Please print name and title of signer: Walter E Busch / Secretary
 NAME TITLE

REGISTRATION REPORT FEE IS:
 ___\$20.00 If filed on or before 8/31/2021
 ___\$25.00 If filed after 9/30/2021

Corporation will be administratively dissolved if report is not filed by 11/29/2023

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): wbusch@sucvwmo.org



State of Missouri
Rebecca McDowell Cook, Secretary of State
 P.O. Box 778, Jefferson City, MO 65102
 Corporation Division

Articles of Incorporation of a Nonprofit Corporation

(To be submitted in duplicate with a filing fee of \$25)

The undersigned natural person(s) of the age of eighteen years or more for the purpose of forming a corporation under the Nonprofit Corporation Law of Missouri adopt the following Articles of Incorporation:

(1) The name of the corporation is Friends of Fort Davidson

(2) This corporation is a Public Benefit corporation.
(Public or Mutual)

(3) The period of duration of the corporation is Perpetual
("Perpetual" unless stated otherwise)

(4) The name and street address of the Registered Agent and Registered Office in Missouri is:
David Proggensee Highway V-21, Pilot Knob, MO 63663
Name Address City/State/Zip

(5) The name(s) and address of each incorporator:
Phyllis Macalady P.O. Box 195 Ironton, MO. 63650
Polly Nellie Box 26 Arcadia, MO 63627
Stephen T. Schultz PO Box 108 Ironton, MO 63650

(6) Does the corporation have members? YES NO

(7) Provisions not inconsistent with law regarding the distribution of assets on dissolution
See attached

(8) The corporation is formed for the following purpose(s):
See attached

(9) The effective date of this document is the date it is filed by the Secretary of State of Missouri,
 unless you indicate a future date, as follows: _____
(Date may not be more than 90 days after the filing date in this office)

In affirmation of the facts stated above,

Signed by Incorporator(s):

Phyllis Macalady
Polly Nellie
Stephen T. Schultz

FILED AND CERTIFICATE OF
 INCORPORATION ISSUED

SEP 15 1999

Rebecca McDowell Cook
 SECRETARY OF STATE

**FRIENDS OF FORT DAVIDSON
ATTACHMENT TO ARTICLES OF INCORPORATION**

- (7) Upon dissolution of the corporation, the Board of Directors shall, after paying or making provisions for the payment of all of the liabilities of the corporation, dispose of all the assets of the corporation exclusively for the purpose of the corporation in such manner, or to such organization or organizations organized and operated exclusively for charitable, educational, and religious, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue code of 1954 (or the corresponding provision of any future United States Internal Revenue Law), as the Board of Directors shall determine.
- (8) The purpose of the organization is to promote the program and welfare of the Fort Davidson State Historic Site and to offer an opportunity for those persons and organizations interested in fostering educational efforts in Civil War history to work with the Fort Davidson State Historic Site in promoting sound educational programs and exhibits in this field.

FILED AND CERTIFICATE OF
INCORPORATION ISSUED

SEP 15 1999

Rebecca McDowell Cook
SECRETARY OF STATE

No. N00062283

STATE OF MISSOURI



Matt Blunt
Secretary of State
CORRECTED

CORPORATION DIVISION

CERTIFICATE OF INCORPORATION

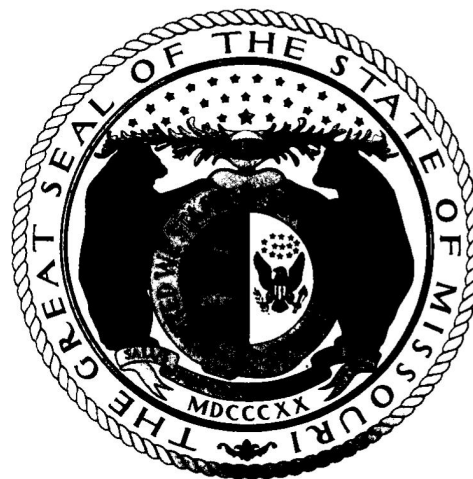
MISSOURI NONPROFIT

WHEREAS, duplicate originals of Articles of Incorporation of
FRIENDS OF FORT DAVIDSON

have been received and filed in the office of the Secretary of
State, which Articles, in all respects, comply with the
requirements of Missouri Nonprofit Corporation Law;

NOW, THEREFORE, I, MATT BLUNT, Secretary of State of the
State of Missouri, by virtue of the authority vested in me
by law, do hereby certify and declare this entity a body
corporate, duly organized this date and that it is entitled to
all rights and privileges granted corporations organized under
the Missouri Nonprofit Corporation Law.

IN TESTIMONY WHEREOF, I have set my
hand and imprinted the GREAT SEAL of
the State of Missouri, on this, the
15th day of SEPTEMBER, 1999.



Matt Blunt

Secretary of State

\$25.00

STATE OF MISSOURI



Rebecca McDowell Cook
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF INCORPORATION
MISSOURI NONPROFIT

WHEREAS, DUPLICATE ORIGINALS OF ARTICLES OF INCORPORATION OF
FRIENDS OF FORT DAVIDSON

HAVE BEEN RECEIVED AND FILED IN THE OFFICE OF THE SECRETARY OF
STATE, WHICH ARTICLES, IN ALL RESPECTS, COMPLY WITH THE
REQUIREMENTS OF MISSOURI NONPROFIT CORPORATION LAW;

NOW, THEREFORE, I, REBECCA MCDOWELL COOK, SECRETARY OF STATE
OF THE STATE OF MISSOURI, BY VIRTUE OF THE AUTHORITY VESTED IN
ME BY LAW, DO HEREBY CERTIFY AND DECLARE THIS ENTITY A BODY
CORPORATE, DULY ORGANIZED THIS DATE AND THAT IT IS ENTITLED TO
ALL RIGHTS AND PRIVILEGES GRANTED CORPORATIONS ORGANIZED UNDER
THE MISSOURI NONPROFIT CORPORATION LAW.

IN TESTIMONY WHEREOF, I HAVE SET MY
HAND AND IMPRINTED THE GREAT SEAL OF
THE STATE OF MISSOURI, ON THIS, THE
15TH DAY OF SEPTEMBER, 1999.

Rebecca McDowell Cook
Secretary of State



\$25.00

CRAR
SEP/14/2000
6083 011001

REBECCA McDOWELL COOK, Secretary Of State
2000 ANNUAL REGISTRATION REPORT
(Nonprofit Corporations)

CHECK #: ~~No~~
AMOUNT: 15⁰⁰
JR

This Report Due By August 31st

NOTE: TO CHANGE REGISTERED AGENT OR OFFICE SHOWN DIRECTLY BELOW, REQUEST FORM #59 FROM THE SECRETARY OF STATE.

1 Corporation Purpose:
(Brief Statement)
Promote and assist
Fort Davidson -
a state 622 acre
site

N00062283
FRIENDS OF FORT DAVIDSON
% DAVID P. ROGGENSEES
HIGHWAY V & 21
PILOT KNOB MO 63663

2 THE CORPORATION IS:
 Mutual Benefit
 Public Benefit

RECEIVED

3 ARE THERE MEMBERS:
 Yes No

4 ORGANIZED UNDER THE LAWS OF:
Missouri

SEP 01 2000

Rebecca McDowell Cook
SECRETARY OF STATE

5 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
HIGHWAY V & 21
STREET PILOT KNOB, MO 63663
CITY/STATE ZIP

6 NAMES AND BUSINESS OR RESIDENCE ADDRESSES OF OFFICERS: (SEE INSTRUCTIONS)
CHAIRMAN Phyllis Macalady
STREET/RT 208 E. Wayne
CITY/STATE/ZIP IRONTON, MO 63650
PRES Walter Busch
STREET/RT Highway V & 21
CITY/STATE/ZIP Pilot Knob, MO 63663
SECY Jean Cadenbach
STREET/RT 5731 Highway N
CITY/STATE/ZIP Robertsville, MO 63072
TREAS Polly Hollie
STREET/RT 115 South College
CITY/STATE/ZIP Arcadia, MO 63621

NAMES AND BUSINESS OR RESIDENCE ADDRESSES OF BOARD OF DIRECTORS: (Must Have 3 or More Directors)
NAME Terry Hammer
STREET/RT 955 2 Donalds Ct
CITY/STATE/ZIP St. Louis, MO 63126
NAME Walter Busch
STREET/RT Highway V & 21
CITY/STATE/ZIP Pilot Knob, MO 63663
NAME Stephen T. Schultz
STREET/RT 920 South Main
CITY/STATE/ZIP Ironton, MO 63650
NAME Charles T. Cadenbach
STREET/RT 5731 Highway N
CITY/STATE/ZIP Robertsville, MO 63072

ATTACH NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS

7 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo 1986
OFFICER SIGN HERE >>> Polly Hollie
Officer signing must be listed in BOX #6A above or on attached list.

8 ATTACHED IS THE REGISTRATION FEE OF:
\$15.00 if filed on or before August 31st.
\$20.00 if filed after August 31st.
Corporation will be administratively dissolved if not filed by November 30th.

N00062283
00 0915999
AC 0915999



COMPLETE ALL BOXES OR FORM WILL BE RETURNED
RETURN AND MAKE CHECK PAYABLE TO SECRETARY OF STATE
P.O. BOX 1366, JEFFERSON CITY, MO 65102

CRAR
OCT/16/2001
6083 006001

MATT BLUNT, Secretary Of State
2001 ANNUAL REGISTRATION REPORT
(Nonprofit Corporations)

CHECK# 1044
AMOUNT \$40.00
[Signature]

NOTE: TO CHANGE REGISTERED AGENT OR OFFICE SHOWN DIRECTLY BELOW, REQUEST FORM #59 FROM THE SECRETARY OF STATE.

This Report Due By August 31st

1 Corporation Purpose: (Brief Statement)
SUPPORT INTERPRETATION EFFORTS AT FORT DAVIDSON STATE HISTORIC SITE

N00062283
FRIENDS OF FORT DAVIDSON
% DAVID P. ROGGENSEES
HIGHWAY V & 21
PILOT KNOB MO 63663

2 THE CORPORATION IS:
 Mutual Benefit
 Public Benefit

3 ARE THERE MEMBERS:
 Yes No

4 ORGANIZED UNDER THE LAWS OF:
Missouri

RECEIVED

OCT 04 2001

Matt Blunt
SECRETARY OF STATE

5 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
Highway V&21 (PO Box 5109)
STREET / Pilot Knob Mo 63663
CITY/STATE / ZIP

6 NAMES AND BUSINESS OR RESIDENCE ADDRESSES OF OFFICERS: (SEE INSTRUCTIONS)

CHAIRMAN	<u>Phyllis Macalady</u>
STREET/RT	<u>208 E WAYNE</u>
CITY/STATE/ZIP	<u>IRONTON MO 63650</u>
VICE-PRES	<u>WALTER BUSCH</u>
STREET/RT	<u>PO Box 509</u>
CITY/STATE/ZIP	<u>PILOT KNOB, MO 63663</u>
SECY	<u>JEAN CADENBACH</u>
STREET/RT	<u>7531 Hwy N</u>
CITY/STATE/ZIP	<u>ROBERTSVILLE MO 63072</u>
TREAS	<u>Polly Houie</u>
STREET/RT	<u>115 S. College</u>
CITY/STATE/ZIP	<u>ARCADIA MO 63621</u>

6 NAMES AND BUSINESS OR RESIDENCE ADDRESSES OF BOARD OF DIRECTORS: (Must Have 3 or More Directors)

NAME	<u>STEVE chulte</u>
STREET/RT	<u>1205 S Main</u>
CITY/STATE/ZIP	<u>Iron ton Mo 63650</u>
NAME	<u>Terry HAMMER</u>
STREET/RT	<u>412 2510 Hampton Ave</u>
CITY/STATE/ZIP	<u>ST LOUIS MO 63139</u>
NAME	<u>Walter Busch</u>
STREET/RT	<u>412 P.O. Box 509</u>
CITY/STATE/ZIP	<u>Pilot Knob MO 63663</u>
NAME	<u>Polly Houie</u>
STREET/RT	<u>115 S. College</u>
CITY/STATE/ZIP	<u>ARCADIA MO 63621</u>

ATTACH NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS

7 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo 1986

OFFICER SIGN HERE >>> *[Signature]*
Officer signing must be listed in BOX #6A above or on attached list.

8 ATTACHED IS THE REGISTRATION FEE OF:
\$15.00 if filed on or before August 31st.
\$20.00 if filed after August 31st.
Corporation will be administratively dissolved if not filed by November 30th.

N00062283
00 0915999
AC 0915999
AG 0901000



COMPLETE ALL BOXES OR FORM WILL BE RETURNED
RETURN AND MAKE CHECK PAYABLE TO SECRETARY OF STATE

1045 #10--
B2N

State of Missouri
Matt Blunt, Secretary of State



Corporations Division
P.O. Box 778, Jefferson City, MO 65102

James C. Kirkpatrick State Information Center
600 W. Main Street, Rm 322, Jefferson City, MO 65101

Statement of Change of Registered Agent and/or
Registered Office
By a Foreign or Domestic For Profit or Nonprofit Corporation

Instructions

1. This form is to be used by either a for profit or nonprofit corporation to change either or both the name of its registered agent and/or the address of its existing registered agent.
2. There is a \$10.00 fee for filing this statement. It must be filed in DUPLICATE.
3. P.O. Box may only be used in conjunction with a physical street address.
4. Agent and address must be in the State of Missouri.
5. The corporation may not act as its own agent.

Charter No. N 00062283

- (1) The name of the corporation is: Friends of Fort Davidson
- (2) The address, including street and number, of its present registered office (before change) is:
Hay V # 21 Pilot Knob, MO 63663
Address City/State/Zip
- (3) The address, including street and number, of its registered office is hereby changed to:
120 South Main, PO Box 108, IRONTON MO 63663
Address (P.O. Box may only be used in conjunction with a physical street address) City/State/Zip
- (4) The name of its present registered agent (before change) is: David P Riggensees
- (5) The name of the new registered agent is: Stephen T Schulte

Authorized signature of new registered agent must appear below:

Stephen T. Schulte
(May attach separate originally executed written consent to this form in lieu of this signature)

- (6) The address of its registered office and the address of the office of its registered agent, as changed, will be identical.
- (7) The change was authorized by resolution duly adopted by the board of directors.

In affirmation of the facts stated above,

Phyllis Macalady
(Authorized signature of officer or, if applicable, chairman of the board)

Phyllis Macalady
(Printed Name)

Chairman
(Title)

10/29/01
(month/day/year)

Corp. #59(11700)

FILED

NOV 01 2001

Matt Blunt
SECRETARY OF STATE

NOV 02 2001



#1161 \$100 JB

State of Missouri
Matt Blunt, Secretary of State

Corporations Division
P.O. Box 778, Jefferson City, MO 65102

James C. Kirkpatrick State Information Center
600 W. Main Street, Rm 322, Jefferson City, MO 65101

**Statement of Change of Registered Agent and/or
Registered Office
By a Foreign or Domestic For Profit or Nonprofit Corporation**

Instructions

1. This form is to be used by either a for profit or nonprofit corporation to change either or both the name of its registered agent and/or the address of its existing registered agent.
2. There is a \$10.00 fee for filing this statement. It must be filed in DUPLICATE.
3. P.O. Box may only be used in conjunction with a physical street address.
4. Agent and address must be in the State of Missouri.
5. The corporation may not act as its own agent.

Charter No. NO00062283

(1) The name of the corporation is: FRIENDS OF FORT DAVIDSON

(2) The address, including street and number, of its **present** registered office (before change) is:
120 SOUTH MAIN, P.O. BOX 1808 IRONTON MO 63663
Address City/State/Zip

(3) The address, including street and number, of its registered office is hereby **changed** to:
118 EAST MAPLE, P.O. BOX 509, PILOT Knob MO 63663
Address (P.O. Box may only be used in conjunction with a physical street address) City/State/Zip

(4) The name of its **present** registered agent (before change) is: STEPHEN T. SCHULTZ

(5) The name of the **new** registered agent is: WALTER E. BUSCH

Authorized signature of **new** registered agent must appear below:

(May attach separate originally executed written consent to this form in lieu of this signature)

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

(7) The change was authorized by resolution duly adopted by the board of directors.

In affirmation of the facts stated above,

(Authorized signature of officer or, if applicable, chairman of the board)

SANDRA L. WALTHER
(Printed Name)

CHAIRPERSON
(Title)

7-28-2002
(month/day/year)

Corp. #59 (11/00)

FILED

JUL 29 2002

SECRETARY OF STATE

JUL 30 2002

CRAR
AUG/19/2002
8042 008001

MATT BLUNT, Secretary Of State
2002 ANNUAL REGISTRATION REPORT
(Nonprofit Corporations)

CHECK#: 1162
AMOUNT: 75.00
P DE
810

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE.

This Report Due By August 31st

1 Corporation Purpose: (Brief Statement)
PROMOTE & ASSIST
FORT DAVIDSON
A STATE HISTORIC
SITE

N00062283
FRIENDS OF FORT DAVIDSON
% STEPHEN T SCHULTE
120 SOUTH MAIN POB 108
IRONTON MO 63663

2 THE CORPORATION IS:
Mutual Benefit
 Public Benefit

NOTE: TO CHANGE REGISTERED AGENT OR OFFICE SHOWN DIRECTLY ABOVE, REQUEST FORM #59 FROM THE SECRETARY OF STATE.

3 ARE THERE MEMBERS:
 Yes No

4 ORGANIZED UNDER THE LAWS OF:
Missouri

RECEIVED

JUL 29 2002

Matt Blunt
SECRETARY OF STATE

5 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
118 E. MAPLE, PO BOX 509
STREET PILOT KNOR MO 63663
CITY/STATE ZIP

6 NAMES AND BUSINESS OR RESIDENCE ADDRESSES OF OFFICERS: (SEE INSTRUCTIONS)
CHAIRMAN SANDRA H. WATHER
STREET/RT 951 MILL CREEK
CITY/STATE/ZIP IMPERIAL MO 63052
PRES RON WARREN
STREET/RT 222 EAST MADISON
CITY/STATE/ZIP IRONTON MO 63650
SECY JEAN CADENBACH
STREET/RT 5731 HIGHWAY N
CITY/STATE/ZIP ROBERTSVILLE MO 63072
TREAS POLLY HOLLIE
STREET/RT 115 SOUTH COLLEGE
CITY/STATE/ZIP ARCADIA, MO 63621

7 NAMES AND BUSINESS OR RESIDENCE ADDRESSES OF BOARD OF DIRECTORS: (Must Have 3 or More Directors)
NAME TERRA HAMMER
STREET/RT 9557 DONALDS CT
CITY/STATE/ZIP ST LOUIS MO 63126
NAME STEPHEN T. SCHULTE
STREET/RT 120 SOUTH MAIN
CITY/STATE/ZIP IRONTON MO 63650
NAME CHARLES T. CADENBACH
STREET/RT 5731 HIGHWAY N
CITY/STATE/ZIP ROBERTSVILLE MO 63072
NAME
STREET/RT
CITY/STATE/ZIP

ATTACH NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS

7 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060, RSMo 1986
OFFICER SIGN HERE >>> Sandra H. Wather
Officer signing must be listed in BOX #6A above or on attached list.

8 ATTACHED IS THE REGISTRATION FEE OF:
\$15.00 if filed on or before August 31st.
\$20.00 if filed after August 31st.
Corporation will be administratively dissolved if not filed by November 30th.

N00062283
01 0915999
AC 0915999
AG 1004001



COMPLETE ALL BOXES OR FORM WILL BE RETURNED
RETURN AND MAKE CHECK PAYABLE TO SECRETARY OF STATE

2003
Matt Blunt Secretary of State
ANNUAL REGISTRATION REPORT
(Nonprofit Corporation)

File Number: 200321140415
 Charter# N00062283
 Date Filed: 07/16/2003 11:04 AM
Matt Blunt
 Secretary of State

THIS REPORT IS DUE BY: 8/31/2003

1 Corporation Purpose:
 (Brief Statement)
PROMOTE & ASSIST
FORT DAVIDSON
STATE HISTORIC
SITE

N00062283
FRIENDS OF FORT DAVIDSON
 WALTER E BUSCH
 118 EAST MAPLE PO BOX 509
 PILOT KNOB, MO 63663

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent
 IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address
 Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

3 THE CORPORATION IS:
 Mutual Benefit
 Public Benefit

4 ARE THERE MEMBERS:
 Yes No

5 ORGANIZED UNDER THE LAWS OF:
Missouri

6 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
118 EAST MAPLE, PO BOX 509
 STREET
PILOT KNOB MO 63663
 CITY/STATE ZIP

7	NAME AND BUSINESS OR RESIDENCE ADDRESS OF OFFICERS: (MUST HAVE 1 OR MORE OFFICERS)	A	NAME AND BUSINESS OR RESIDENCE ADDRESS OF BOARD DIRECTORS: (MUST HAVE 3 OR MORE DIRECTORS)	B
	CHAIRMAN <u>SANDRA L. WALTHER</u>		NAME <u>TERRY HALLNER</u>	
	STREET/RT <u>PO BOX 381</u>		STREET/RT <u>9557 DONALD CT.</u>	
	CITY/STATE/ZIP <u>ARCADIA, MO 63663</u>		CITY/STATE/ZIP <u>St Louis MO 63126</u>	
	PRES		NAME <u>STEPHEN T. SCHULTE</u>	
	STREET/RT		STREET/RT <u>120 So MAIN</u>	
	CITY/STATE/ZIP		CITY/STATE/ZIP <u>IRONTON, MO 63650</u>	
	SECY <u>JEAN CADENBACH</u>		NAME <u>CHARLES T. CADENBACH</u>	
	STREET/RT <u>5731 HIGHWAY N</u>		STREET <u>5731 HIGHWAY N</u>	
	CITY/STATE/ZIP <u>ROBERTSVILLE MO 63072</u>		CITY/STATE/ZIP <u>ROBERTSVILLE MO 63072</u>	
	TREAS <u>POLLY HALLIE</u>		NAME	
	STREET/RT <u>15 SOUTH COLLEGE</u>		STREET/RT	
	CITY/STATE/ZIP <u>ARCADIA MO 63621</u>		CITY/STATE/ZIP	

ATTACH NAMES AND ADDRESSES ALL OTHER OFFICERS AND DIRECTORS

8 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo 1986

OFFICER SIGN HERE >>> Sandra L. Walther
 Original signature of officer listed above required. (Photocopy or stamped signature not acceptable.)

9 ATTACHED IS THE REGISTRATION FEE OF:
 \$15.00 If filed on or before August 31st.
 \$20.00 If filed after August 31st.
 Corporation will be automatically dissolved if report is not filed by November 30th.

N00062283
 01 000000
 AG 000000
 AG 000000

INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

N00062283



CORPORATE E-MAIL ADDRESS _____

REQUIRED INFORMATION MUST BE COMPLETED

RETURN COMPLETED REGISTRATION REPORT TO: **State of Missouri**
 Annual Report - NonProfit 1 Page(s)

3 BE REJECTED \$15.00
 OFFICER CITY, MO 65102

SCS FORM/FSCORP661 2002



Matt Blunt Secretary of State
 2004 ANNUAL REGISTRATION REPORT
 NONPROFIT

File Number: 200419011737
 N00062283
 Date Filed: 06/30/2004
 Matt Blunt
 Secretary of State

REPORT DUE BY: 08/31/2004

ORGANIZED UNDER THE LAWS OF:
Missouri

N00062283
 FRIENDS OF FORT DAVIDSON
 WALTER E BUSCH
 118 EAST MAPLE PO BOX 509
 PILOT KNOB, MO 63663

PRINCIPAL PLACE OF BUSINESS OR
 CORPORATE HEADQUARTERS:
 1 118 EAST MAPLE
 STREET
Pilot Knob Mo 63663
 CITY/STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
 The new registered agent
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
 The new registered office address
 Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS		BOARD OF DIRECTORS	
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE): MUST LIST AT LEAST ONE OFFICER BELOW.		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE): MUST LIST AT LEAST THREE DIRECTORS BELOW.	
PRES	<u>SANDRA L. WALTHER?</u>	NAME	<u>TERRY HAMMER</u>
STREET/RT	<u>220 N. CALLE GE</u>	STREET/RT	<u>9557 D. DAVID CT.</u>
CITY/STATE/ZIP	<u>ARCADIA Mo 63621</u>	CITY/STATE/ZIP	<u>ST LOUIS Mo 63126</u>
V-PRES		NAME	<u>STEPHEN V. T. SCHMIDT</u>
STREET/RT		STREET/RT	<u>120 SOUTH MAIN</u>
CITY/STATE/ZIP		CITY/STATE/ZIP	<u>IRONTON Mo 63650</u>
SECY	<u>JEAN J. CADENBACH</u>	NAME	<u>CHARLES T. CADENBACH</u>
STREET/RT	<u>5731 HIGHWAY N</u>	STREET/RT	<u>5731 HIGHWAY N</u>
CITY/STATE/ZIP	<u>ROBERTSVILLE Mo 63072</u>	CITY/STATE/ZIP	<u>ROBERTSVILLE Mo 63072</u>
TREAS	<u>POLLY HANNE</u>	NAME	
STREET/RT	<u>115 V. SOUTH COLLEGE</u>	STREET/RT	
CITY/STATE/ZIP	<u>ARCADIA Mo 63621</u>	CITY/STATE/ZIP	

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officers sign here Sandra L. Walther

Please print name and title of signer: SANDRA L. WALTHER PRESIDENT

NAME TITLE

REGISTRATION REPORT FEE IS:
 \$15.00 If filed on or before 8/31
 \$20.00 If filed after 8/31
 Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED



Robin Carnahan Secretary of State
 2005 ANNUAL REGISTRATION REPORT
 NONPROFIT

File Number: 200516890055
N00062283
Date Filed: 06/17/2005
Robin Carnahan
Secretary of State

REPORT DUE BY: **03/31/2005**

ORGANIZED UNDER THE LAWS OF:
Missouri

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB, MO 63663

PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
 118 East Maple)
 STREET
 Pilot Knob, MO 63663
 CITY/STATE ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address
Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

<p style="text-align: center;">OFFICERS</p> <p>NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST ONE OFFICER BELOW.</u></p> <p>PRES Sandra L Walther-Busch STREET/RT 220 North College, PO Box 381 CITY/STATE/ZIP Arcadia, MO 63621</p> <p>V-PRES</p> <p>STREET/RT</p> <p>CITY/STATE/ZIP</p> <p>SECY David Christopher Warren STREET/RT 1150 Hawthorne Rd, Apt 14 CITY/STATE/ZIP Bonne Terre, MO 63628</p> <p>TREAS Pauline Hollie STREET/RT 115 South College CITY/STATE/ZIP Arcadia, MO 63621</p>	A	<p style="text-align: center;">BOARD OF DIRECTORS</p> <p>NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST THREE DIRECTORS BELOW.</u></p> <p>NAME Terry Hammer STREET/RT 9557 Donald Ct CITY/STATE/ZIP St Louis, MO 63126</p> <p>NAME Stephen T Schulte STREET/RT 120 South Main CITY/STATE/ZIP Ironton, MO 63650</p> <p>NAME Charles T Cadenbach STREET/RT 5731 Highway N CITY/STATE/ZIP Robertsville, MO 63072</p> <p>NAME</p> <p>STREET/RT</p> <p>CITY/STATE/ZIP</p>	B
---	----------	---	----------

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

4 Authorized party or officer sign here Walter Erich Busch

Please print name and title of signer: Walter Erich Busch / Registered Agent
 NAME TITLE

REGISTRATION REPORT FEE IS:
 ___ \$10.00 If filed on or before 8/31
 ___ \$15.00 If filed after 8/31
 Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED
 MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

Robin Carnahan Secretary of State
 2006 ANNUAL REGISTRATION REPORT
 NONPROFIT

File Number: 200620490045
N00062283
Date Filed: 07/23/2006
Robin Carnahan
Secretary of State

REPORT DUE BY: **03/31/2006**

ORGANIZED UNDER THE LAWS OF:
Missouri

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB, MO 63663

PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
1 118 East Maple (Box 509)
STREET
Pilot Knob, MO 63663
CITY/STATE ZIP

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The new registered agent
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OFFICERS		BOARD OF DIRECTORS	
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST ONE OFFICER BELOW.</u>		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST THREE DIRECTORS BELOW.</u>	
PRES	Patricia Hagler	NAME	Terry Hammer
STREET/RT	Route 1 Box 123	STREET/RT	9557 Donald Ct
CITY/STATE/ZIP	Patterson, MO 63956-9733	CITY/STATE/ZIP	St Louis, MO 63126
V-PRES	David Hagler	NAME	Stephen T Schulte
STREET/RT	Route 1 Box 123	STREET/RT	120 South Main
CITY/STATE/ZIP	Patterson, MO 63956-9733	CITY/STATE/ZIP	Ironton, MO 63650
SECY	David Christopher Warren	NAME	Charles T Cadenbach
STREET/RT	900 Taylor Apt 17	STREET/RT	5731 Highway N
CITY/STATE/ZIP	Park Hills, MO 63601	CITY/STATE/ZIP	Robertsville, MO 63072
TREAS	Pauline Hollie	NAME
STREET/RT	115 South College	STREET/RT
CITY/STATE/ZIP	Arcadia, MO 63621	CITY/STATE/ZIP

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

4 Authorized party or officer sign here Walter Erich Busch (Required)

Please print name and title of signer: Walter Erich Busch / Registered Agent
 NAME TITLE

REGISTRATION REPORT FEE IS:
 ___ \$10.00 if filed on or before 8/31
 ___ \$15.00 if filed after 8/31
 Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO THE SECRETARY OF STATE - P.O. BOX 1366, JEFFERSON CITY, MO 65102

Robin Carnahan Secretary of State

2007 ANNUAL REGISTRATION REPORT

NONPROFIT

File Number: 200718491749

N00062283

Date Filed: 07/03/2007

Robin Carnahan

Secretary of State

REPORT DUE BY: **08/31/2007**

ORGANIZED UNDER THE LAWS OF:
Missouri

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB, MO 63663

PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:

118 East Maple (Box 509)

STREET

Pilot Knob, MO

63663

CITY/STATE

ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST ONE OFFICER BELOW.

A

PRES **Charles T Cadenbach**
 STREET/RT **Route 1 Box 1235731 Highay N**
 CITY/STATE/ZIP **Robertsville, MO 63072**
 V-PRES **Michael Roderman**
 STREET/RT **Route 1 Box 250**
 CITY/STATE/ZIP **Licking, MO 65542**
SECY **David Christopher Warren**
 STREET/RT **106 Marie Ct Apt 78**
 CITY/STATE/ZIP **Bonne Terre, MO 63628**
 TREAS **Pauline Hollie**
 STREET/RT **115 South College**
 CITY/STATE/ZIP **Arcadia, MO 63621**

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW.

B

NAME **Terry Hammer**
 STREET/RT **9557 Donald Ct**
 CITY/STATE/ZIP **St Louis, MO 63126**
NAME **Stephen T Schulte**
 STREET/RT **120 South Main**
 CITY/STATE/ZIP **Ironton, MO 63650**
NAME **Carl Warren**
 STREET/RT **1054 Tyler Trail**
 CITY/STATE/ZIP **Farmington, MO 63640**
NAME

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Walter Erich Busch

(Required)

Please print name and title of signer:

Walter Erich Busch
NAME

Registered Agent
TITLE

REGISTRATION REPORT FEE IS:

___ \$10.00 If filed on or before 8/31

___ \$15.00 If filed after 8/31

Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO THE SECRETARY OF STATE - P.O. BOX 1366, JEFFERSON CITY, MO 65102

Robin Carnahan Secretary of State 2008 ANNUAL REGISTRATION REPORT

NONPROFIT

File Number: 200819990477

N00062283

Date Filed: 07/17/2008

Robin Carnahan
Secretary of State

REPORT DUE BY: **08/31/2008**

ORGANIZED UNDER THE LAWS OF:
Missouri

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB, MO 63663

PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:

118 East Maple (Box 509)

STREET

Pilot Knob, MO

63663

CITY/STATE

ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent _____

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The new registered office address _____

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OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST ONE OFFICER BELOW.

PRES **Charles T Cadenbach**
STREET/RT **Route 1 Box 1235731 Highay N**
CITY/STATE/ZIP **Robertsville, MO 63072**

V-PRES **Michael Roderman**
STREET/RT **Route 1 Box 250**

CITY/STATE/ZIP **Licking, MO 65542**

SECY **David Christopher Warren**

STREET/RT **106 Marie Ct Apt 78**

CITY/STATE/ZIP **Bonne Terre, MO 63628**

TREAS **Pauline Hollie**

STREET/RT **115 South College**

CITY/STATE/ZIP **Arcadia, MO 63621**

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW.

NAME **Terry Hammer**
STREET/RT **9557 Donald Ct**
CITY/STATE/ZIP **St Louis, MO 63126**

NAME **Stephen T Schulte**
STREET/RT **120 South Main**

CITY/STATE/ZIP **Ironton, MO 63650**

NAME **Gary Scheel**

STREET/RT **383 Jefferson St**

CITY/STATE/ZIP **Ste. Genevieve, MO 63670**

NAME **Carl Warren**

STREET/RT **1054 Tyler Trail**

CITY/STATE/ZIP **Farmington, MO 63640**

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Walter Erich Busch

(Required)

Please print name and title of signer:

Walter Erich Busch
NAME

/

Agent
TITLE

REGISTRATION REPORT FEE IS:

___ \$10.00 If filed on or before 8/31

___ \$15.00 If filed after 8/31

Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO THE SECRETARY OF STATE - P.O. BOX 1366, JEFFERSON CITY, MO 65102

Robin Carnahan Secretary of State 2009 ANNUAL REGISTRATION REPORT

NONPROFIT

File Number: 200920090152

N00062283

Date Filed: 07/19/2009

Robin Carnahan
Secretary of State

REPORT DUE BY: **08/31/2009**

ORGANIZED UNDER THE LAWS OF:
Missouri

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB, MO 63663

PRINCIPAL PLACE OF BUSINESS OR
CORPORATE HEADQUARTERS:

118 East Maple (Box 509)

STREET

Pilot Knob, MO

63663

CITY/STATE

ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address

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OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST ONE OFFICER BELOW.

PRES Charles T Cadenbach
STREET/RT Route 1 Box 1235731 Highay N
CITY/STATE/ZIP Robertsville, MO 63072
V-PRES Michael Roderman
STREET/RT Route 1 Box 250
CITY/STATE/ZIP Licking, MO 65542
SECY Twyla Warren
STREET/RT 106 Marie Ct Apt 78
CITY/STATE/ZIP Bonne Terre, MO 63628
TREAS Pauline Hollie
STREET/RT 115 South College
CITY/STATE/ZIP Arcadia, MO 63621

A

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW.

NAME Terry Hammer
STREET/RT 9557 Donald Ct
CITY/STATE/ZIP St Louis, MO 63126
NAME Stephen T Schulte
STREET/RT 120 South Main
CITY/STATE/ZIP Ironton, MO 63650
NAME Carl Warren
STREET/RT 1054 Tyler Trail
CITY/STATE/ZIP Farmington, MO 63640
NAME
STREET/RT
CITY/STATE/ZIP

B

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Walter Erich Busch

(Required)

Please print name and title of signer:

Walter Erich Busch
NAME

/

Agent
TITLE

REGISTRATION REPORT FEE IS:

___ \$10.00 If filed on or before 8/31

___ \$15.00 If filed after 8/31

Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO THE SECRETARY OF STATE - P.O. BOX 1366, JEFFERSON CITY, MO 65102

Robin Carnahan Secretary of State
 2010 ANNUAL REGISTRATION REPORT
 NONPROFIT

File Number: 201016990231
 N00062283
 Date Filed: 06/18/2010
 Robin Carnahan
 Secretary of State

REPORT DUE BY: 08/31/2010

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB, MO 63663

ORGANIZED UNDER THE LAWS OF
Missouri

1 **PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:**
118 East Maple (Box 509)
STREET
Pilot Knob, MO 63663
CITY/STATE ZIP

2 **If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.**
 The new registered agent
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
 The new registered office address _____
Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS		BOARD OF DIRECTORS	
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST ONE OFFICER BELOW.</u> A		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST THREE DIRECTORS BELOW.</u> B	
<u>PRES</u>	Charles T Cadenbach	<u>NAME</u>	Terry Hammer
STREET/RT	Route 1 Box 1235731 Highay N	STREET/RT	9557 Donald Ct
CITY/STATE/ZIP	Robertsville, MO 63072	CITY/STATE/ZIP	St Louis, MO 63126
V-PRES	Michael Roderman	NAME	Stephen T Schulte
STREET/RT	Route 1 Box 250	STREET/RT	120 South Main
CITY/STATE/ZIP	Licking, MO 65542	CITY/STATE/ZIP	Ironton, MO 63650
<u>SECY</u>	Twyla Warren	NAME	Carl Warren
STREET/RT	106 Marie Ct Apt 78	STREET/RT	1054 Tyler Trail
CITY/STATE/ZIP	Bonne Terre, MO 63628	CITY/STATE/ZIP	Farmington, MO 63640
TREAS	Sandra L Walther	NAME
STREET/RT	220 N College Box 381	STREET/RT
CITY/STATE/ZIP	Arcadia, MO 63621-0381	CITY/STATE/ZIP
NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED			

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here Walter Erich Busch (Required)

Please print name and title of signer: Walter Erich Busch / Registered Agent
 NAME TITLE

REGISTRATION REPORT FEE IS:
 ___ \$10.00 If filed on or before 8/31
 ___ \$15.00 If filed after 8/31

Corporation will be administratively dissolved if report is not filed by November 30.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED
 MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE
 RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO: Secretary of State, P.O. Box 1366, Jefferson City, MO 65102

Robin Carnahan Secretary of State

2011-2012 BIENNIAL REGISTRATION REPORT

NONPROFIT

File Number: 201121380909

N00062283

Date Filed: 08/01/2011

Robin Carnahan

Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

REPORT DUE BY: 08/31/2011

N00062283

FRIENDS OF FORT DAVIDSON

WALTER E BUSCH

118 EAST MAPLE PO BOX 509

PILOT KNOB, MO 63663

ORGANIZED UNDER THE LAWS OF:

Missouri

PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:

118 East Maple (Box 509)

STREET

Pilot Knob, MO

63663

CITY/STATE

ZIP

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The new registered agent

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OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST ONE OFFICER BELOW.

PRES Charles T Cadenbach

STREET/RT **14350 Count Rd #8450**

CITY/STATE/ZIP **Rolla, MO 65401**

V-PRES **Carl Warren**

STREET/RT **1054 Tyler Trail**

CITY/STATE/ZIP **Farmington, MO 63640**

SECY David Christopher Warren

STREET/RT **1100 North St Joe Dr Apt 21**

CITY/STATE/ZIP **Park Hills, MO 63601**

TREAS **Sandra L Walther**

STREET/RT **220 N College Box 381**

CITY/STATE/ZIP **Arcadia, MO 63621-0381**

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW.

NAME Terry Hammer

STREET/RT **9557 Donald Ct**

CITY/STATE/ZIP **St Louis, MO 63126**

NAME **Stephen T Schulte**

STREET/RT **120 South Main**

CITY/STATE/ZIP **Ironton, MO 63650**

NAME **R Scott Killen**

STREET/RT **c/o Fort Davidson SHS**

118 East Maple Box 509

CITY/STATE/ZIP **Pilot Knob, MO 63663**

STREET/RT

CITY/STATE/ZIP

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Walter E Busch

(Required)

Please print name and title of signer:

Walter E Busch

Agent

NAME

TITLE

REGISTRATION REPORT FEE IS:

___ \$20.00 If filed on or before 8/31

___ \$25.00 If filed after 8/31

Corporation will be administratively dissolved if report is not filed by November 30.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO: Secretary of State, P.O. Box 1366, Jefferson City, MO 65102

Jason Kander Secretary of State

2013-2014 BIENNIAL REGISTRATION REPORT

NONPROFIT

File Number: 201319280248

N00062283

Date Filed: 07/11/2013

Jason Kander

Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

REPORT DUE BY: 08/31/2013

N00062283

FRIENDS OF FORT DAVIDSON

WALTER E BUSCH

118 EAST MAPLE PO BOX 509

PILOT KNOB, MO 63663

ORGANIZED UNDER THE LAWS OF:

Missouri

PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:

118 East Maple (Box 509)

STREET

Pilot Knob, MO

63663

CITY/STATE

ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST ONE OFFICER BELOW.

PRES Charles T Cadenbach

STREET/RT **14350 Count Rd #8450**

CITY/STATE/ZIP **Rolla, MO 65401**

V-PRES **Carl Warren**

STREET/RT **1054 Tyler Trail**

CITY/STATE/ZIP **Farmington, MO 63640**

SECY David Christopher Warren

STREET/RT **1100 North St Joe Dr Apt 21**

CITY/STATE/ZIP **Park Hills, MO 63601**

TREAS **Sandra L Walther**

STREET/RT **220 N College Box 381**

CITY/STATE/ZIP **Arcadia, MO 63621-0381**

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW.

NAME Terry Hammer

STREET/RT **9557 Donald Ct**

CITY/STATE/ZIP **St Louis, MO 63126**

NAME Stephen T Schulte

STREET/RT **120 South Main**

CITY/STATE/ZIP **Ironton, MO 63650**

NAME R Scott Killen

STREET/RT **c/o Fort Davidson SHS**

118 East Maple Box 509

CITY/STATE/ZIP **Pilot Knob, MO 63663**

STREET/RT

CITY/STATE/ZIP

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Walter E Busch

(Required)

Please print name and title of signer:

Walter E Busch

Registered Agent

NAME

TITLE

REGISTRATION REPORT FEE IS:

___ \$20.00 If filed on or before 8/31

___ \$25.00 If filed after 8/31

Corporation will be administratively dissolved if report is not filed by November 30.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO: Secretary of State, P.O. Box 1366, Jefferson City, MO 65102

N00062283
Date Filed: 6/29/2015
Jason Kander
Missouri Secretary of State

*** SECTION 1, 3 & 4 ARE REQUIRED**

REPORT DUE BY: 8/31/2015

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB MO 63663

ORGANIZED UNDER THE LAWS OF:
Missouri

1 PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: *
118 East Maple (Box 509) (Required)
STREET
Pilot Knob MO 63663
CITY/ STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
 The new registered agent _____
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
 The new registered office address _____
Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

3 OFFICERS BOARD OF DIRECTORS *
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST PRESIDENT AND SECRETARY BELOW **A** NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW **B**
PRESIDENT Cadenbach, Charles T
STREET 14350 County Rd #8450
CITY/STATE/ZIP Rolla MO 65401
SECRETARY Schulte, Stephen
STREET 120 South Main
CITY/STATE/ZIP Ironton MO 63650
VICE PRESIDENT Warren, Carl
STREET 1054 Tyler Trail
CITY/STATE/ZIP Farmington MO 63640
TREASURER Schulte, Stephen
STREET 120 South Main
CITY/STATE/ZIP Ironton MO 63650
NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 576.060 RSMo. Photocopy or stamped signature not acceptable. *
Authorized party or officer sign here Walter E Busch (Required)
Please print name and title of signer: Walter E Busch / Other
NAME TITLE

REGISTRATION REPORT FEE IS:
___ \$10.00 if filed on or before 8/31/2015
___ \$15.00 if filed after 9/30/2015
Corporation will be administratively dissolved if report is not filed by 11/29/2016

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE
E-MAIL ADDRESS (OPTIONAL): webusch@hotmail.com

N00062283
Date Filed: 6/14/2016
Jason Kander
Missouri Secretary of State

*** SECTION 1, 3 & 4 ARE REQUIRED**

REPORT DUE BY: 8/31/2016

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB MO 63663

	ORGANIZED UNDER THE LAWS OF: <u>Missouri</u>
1	PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: * <u>118 East Maple (Box 509)</u> (Required) STREET <u>Pilot Knob MO 63663</u> CITY/ STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent _____
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address _____

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS		BOARD OF DIRECTORS *	
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST PRESIDENT AND SECRETARY BELOW</u>		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST THREE DIRECTORS BELOW</u>	
<u>PRESIDENT</u>	Cadenbach, Charles T 14350 County Rd #8450 STREET Rolla MO 65401 CITY/STATE/ZIP	<u>NAME</u>	Warren, David Christopher 1100 No St Joe Dr Apt 21 STREET Park Hills MO 63601 CITY/STATE/ZIP
<u>SECRETARY</u>	Schulte, Stephen 120 South Main STREET Ironton MO 63650 CITY/STATE/ZIP	<u>NAME</u>	Abney, John 3792 Hwy F STREET Annapolis MO 63620 CITY/STATE/ZIP
<u>VICE PRESIDENT</u>	Warren, Carl 1054 Tyler Trail STREET Farmington MO 63640 CITY/STATE/ZIP	<u>NAME</u>	Killen, R Scott 118 E Maple St #509 STREET Pilot Knob MO 63663 CITY/STATE/ZIP
<u>TREASURER</u>	Schulte, Stephen 120 South Main STREET Ironton MO 63650 CITY/STATE/ZIP	<u>NAME</u>	

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 576.060 RSMo. Photocopy or stamped signature not acceptable. *

Authorized party or officer sign here: Walter E Busch (Required)

Please print name and title of signer: Walter E Busch / Other
NAME TITLE

REGISTRATION REPORT FEE IS:
___ \$10.00 if filed on or before 8/31/2016
___ \$15.00 if filed after 9/30/2016

Corporation will be administratively dissolved if report is not filed by 11/29/2017

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): wbusch@sucvcmo.org

John R. Ashcroft Secretary of State
 2017-2018 BIENNIAL REGISTRATION REPORT
 NONPROFIT

N00062283
Date Filed: 6/27/2017
John R. Ashcroft
Missouri Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

* SECTION 1, 3 & 4 ARE REQUIRED

REPORT DUE BY: 8/31/2017

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB MO 63663

ORGANIZED UNDER THE LAWS OF:
Missouri

PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:
 *
118 East Maple (Box 509) (Required)
 1
 STREET
Pilot Knob MO 63663
 CITY/ STATE ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.
 The new registered agent
 IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.
 The new registered office address
 Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

<p>OFFICERS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST PRESIDENT AND SECRETARY BELOW A</p> <p><u>PRESIDENT</u> Cadenbach, Charles T STREET 14350 County Rd #8450 CITY/STATE/ZIP <u>Rolla MO 65401</u></p> <p><u>SECRETARY</u> Busch, Walter E STREET 1240 Kone rt Valley Dr CITY/STATE/ZIP <u>Fenton MO 63026</u></p> <p><u>VICE PRESIDENT</u> Warren, Carl STREET 1054 Tyler Trail CITY/STATE/ZIP <u>Farmington MO 63640</u></p> <p><u>TREASURER</u> Schulte, Stephen STREET 120 South Main CITY/STATE/ZIP <u>Ironton MO 63650</u></p>	<p>BOARD OF DIRECTORS NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW B</p> <p><u>NAME</u> Warren, David Christopher STREET 1100 No St Joe Dr Apt 21 CITY/STATE/ZIP <u>Park Hills MO 63601</u></p> <p><u>NAME</u> Abney, John STREET 3792 Hwy F CITY/STATE/ZIP <u>Annapolis MO 63620</u></p> <p><u>NAME</u> Killen, R Scott STREET 118 E Maple St #509 CITY/STATE/ZIP <u>Pilot Knob MO 63663</u></p>
---	---

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 576.060 RSMo. Photocopy or stamped signature not acceptable. *

4 **Authorized party or officer sign here** Walter E Busch (Required)

Please print name and title of signer: Walter E Busch / Secretary
 NAME TITLE

REGISTRATION REPORT FEE IS:
 ___ \$20.00 if filed on or before 8/31/2017
 ___ \$25.00 if filed after 9/30/2017

Corporation will be administratively dissolved if report is not filed by 11/29/2019

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): webusch@hotmail.com

John R. Ashcroft Secretary of State
2019-2020 BIENNIAL REGISTRATION REPORT
NONPROFIT

N00062283
Date Filed: 5/24/2019
John R. Ashcroft
Missouri Secretary of State

I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

* SECTION 1, 3 & 4 ARE REQUIRED

REPORT DUE BY: 8/31/2019

N00062283
FRIENDS OF FORT DAVIDSON
WALTER E BUSCH
118 EAST MAPLE PO BOX 509
PILOT KNOB MO 63663

	ORGANIZED UNDER THE LAWS OF: <u>Missouri</u>
1	PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS: * <u>118 East Maple (Box 509)</u> (Required) STREET <u>Pilot Knob MO 63663</u> CITY/ STATE ZIP

2 If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

The new registered agent

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

The new registered office address 1240 Konert Valley Dr Fenton MO 63026

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS		BOARD OF DIRECTORS *	
NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST PRESIDENT AND SECRETARY BELOW</u>		NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). <u>MUST LIST AT LEAST THREE DIRECTORS BELOW</u>	
<u>PRESIDENT</u>	Cadenbach, Charles T 14350 County Rd #8450 STREET Rolla MO 65401 CITY/STATE/ZIP	<u>NAME</u>	Schulte, Stephen 120 South Main St STREET Ironton MO 63650 CITY/STATE/ZIP
<u>SECRETARY</u>	Busch, Walter E 1240 Konert Valley Dr STREET Fenton MO 63026 CITY/STATE/ZIP	<u>NAME</u>	Abney, John 3792 Hwy F STREET Annapolis MO 63620 CITY/STATE/ZIP
<u>VICE PRESIDENT</u>	Warren, Carl 1054 Tyler Trail STREET Farmington MO 63640 CITY/STATE/ZIP	<u>NAME</u>	Killen, R Scott 118 E Maple St #509 STREET Pilot Knob MO 63663 CITY/STATE/ZIP
<u>TREASURER</u>	Busch, Walter E 1240 Konert Valley Dr STREET Fenton MO 63026 CITY/STATE/ZIP	<u>NAME</u>	

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

4 The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable. *

Authorized party or officer sign here: Walter E Busch (Required)

Please print name and title of signer: Walter E Busch / Secretary
NAME TITLE

REGISTRATION REPORT FEE IS:
__ \$20.00 if filed on or before 8/31/2019
__ \$25.00 if filed after 9/30/2019

Corporation will be administratively dissolved if report is not filed by 11/29/2021

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL): webusch@hotmail.com