

John Thurston, Arkansas Secretary of State COOPERATIVE ASSOCIATION/ CORPORATION ANNUAL REPORT 2023

For the year ending 12/31/2022

Pursuant to A.C.A. § 4-30-114 (PLEASE TYPE OR PRINT CLEARLY IN BLACK INK)

1. Name of the Corporation:			
2. Jurisdiction under which the corporation is incorpo			
3. Agent for Service of Process:			
Street Address:			
City:		Zip:	
Mailing Address (if different than above):			
City:	State:	Zip:	
4. Principal Office Street Address:			
City:	State:	Zip:	
Principal Office Mailing Address (if different than a	bove):		
City:			
Email Address:			
5. Names of Principal Officers:			
6. The total number of authorized shares, itemized by class and series, if any, within each class:			
7. The total number of issued and outstanding shares, itemized by class and series, if any, within each class:			
8. Please include the names of stockholders and amount of stock owned by each and submit it with this			
annual report:			
I understand that knowingly signing a false docur	ent with the intent to file with the Ar	kansas Secretary of State is a Class C	
misdemeanor and is punishable by a fine up to \$10			
Executed this day of	(Month) (Year)	_	
Authorizing Officer		Signature of Authorizing Officer	
(Type or Print in Black Ink)	U.g.	(Sign in Black Ink)	
Business and Commercial Services Division			