

1.) CORPORATION NAME:

**JOE MORTEN & SON, INC.**

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOHN K MESSERSMITH IV  
901 MOOREFIELD PARK DR STE 200  
RICHMOND, VA**

SCC ID NO: **F1547258**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**CHESTERFIELD COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1100 WEST 29TH ST  
BOX 277

CITY/ST/ZIP: SOUTH SIOUX CITY, NE 68776

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RANDALL J. OLIGMUELLER	
TITLE:	PRESIDENT	
ADDRESS:	3311 DANIELS LANE	
CITY/ST/ZIP/CO:	SOUTH SIOUX CITY, NE 68776	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JAMES E. ARENDS	
TITLE:	VICE PRESIDENT	
ADDRESS:	1100 WEST 29TH STREET	
CITY/ST/ZIP/CO:	SOUTH SIOUX CITY, NE 68776	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MARY E. BONGARD	
TITLE:	VICE PRESIDENT	
ADDRESS:	624 SIX FLAGS DRIVE, #240	
CITY/ST/ZIP/CO:	ARLINGTON, TX 76011	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DAVID J. ERLANDSON	
TITLE:	VICE PRESIDENT	
ADDRESS:	3311 DANIELS LANE	
CITY/ST/ZIP/CO:	SOUTH SIOUX CITY, NE 68776	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	THOMAS A. KOENIGS	
TITLE:	VICE PRESIDENT	
ADDRESS:	1100 WEST 29TH STREET	
CITY/ST/ZIP/CO:	SOUTH SIOUX CITY, NE 68776	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ROBERT E. RIMMELE	
TITLE:	VICE PRESIDENT	
ADDRESS:	6747 SOUTH KINGERY HIGHWAY	
CITY/ST/ZIP/CO:	WILLOWBROOK, IL 60527	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL A. RITTER VICE PRESIDENT 10100 Global Way, #200 KNOXVILLE, TN 37932	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEVIN S. SHERRITZE VICE PRESIDENT 10100 Global Way #200 KNOXVILLE, TN 37932	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK J STOREY VICE PRESIDENT 3108 104TH STREET URBANDALE, IA 50322	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES T. TWEDT VICE PRESIDENT 3108 104TH STREET URBANDALE, IA 50322	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANK J. WHITING VICE PRESIDENT 1100 WEST 29TH STREET SOUTH SIOUX CITY, NE 68776	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GLADE R. WILKES VICE PRESIDENT 2601 FORTUNE CIRCLE EAST, SUITE 100A INDIANAPOLIS, IN 46241	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GAYLEN L TENHULZEN TREASURER 1100 WEST 29TH STREET SOUTH SIOUX CITY, NE 68776	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY E. ANDERSON ASST TREASURER 1100 WEST 29TH STREET SOUTH SIOUX CITY, NE 68776	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HUGH H FUGLEBERG COB 1100 WEST 29TH ST SOUTH SIOUX CITY, NE 68776	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CRAIG A. POSSON SECRETARY 1100 WEST 29TH STREET SOUTH SIOUX CITY, NE 68776	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES D. JENSEN DIRECTOR 1100 WEST 29TH STREET SOUTH SIOUX CITY, NE 68776	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Scott J Robinson TITLE: VICE PRESIDENT ADDRESS: 1100 West 29th Street CITY/ST/ZIP/CO: South Sioux City, NE 68776	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ CRAIG A. POSSON	CRAIG A. POSSON, SECRETARY	5/22/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.