



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2011

**1. ID No.** 000486260

**2. Exact Name of the Limited Liability Company** Ethanol Products LLC

**3. State of Formation**

State: SD

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

importer of denatured ethanol

**5. Principal Office Address**

No. and Street: 3939 N. WEBB RD

City or Town: WICHITA

State: KS

Zip: 67226

Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: HEATHER GULLIC Contact Title: SR. TAX ACCOUNTANT

No. and Street: 3939 N WEBB RD

City or Town: WICHITA

State: KS

Zip: 67226

Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
MANAGER	DAN LOVELAND	4615 N LEWIS AVE SIOUX FALLS, SD 57108 USA
MANAGER	ROBERT K CASPER	3939 N WEBB RD WICHITA, KS 67226 USA
MANAGER	JEFFREY S LAUTT	4615 N LEWIS AVE SIOUX FALLS, SD 57108 USA
MANAGER	CRAIG LUDTKE	119 S NEWTON AVE ALBERT LEA, MN 56007 USA
MANAGER	JEFF BROIN	4615 N LEWIS AVE SIOUX FALLS, SD 57108 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

NATIONAL REGISTERED AGENTS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 4 Day of October, 2011 at 2:58:48 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By HEATHER GULLIC  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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