



15571603



STATE OF MONTANA
SECRETARY OF STATE
2023 ANNUAL REPORT

For Office Use Only
STATE OF MONTANA
-FILED-
SECRETARY OF STATE
File Number: 15571603
Date Filed: 2/22/2023 10:20:29 AM

FILING FEE: \$20.00 prior to April 15
FILING FEE: \$35.00 after April 15

Filing Fees & Processing Options		Fees and Processing Options			Standard Processing - \$20.00 (\$35.00 if past due date) - Annual Reports are auto-filed
Filing Effective Date		The annual report will be effective when filed.			
Business Type		Business Type			Domestic Profit Corporation
		Business Sub-Type			General For Profit Corporation
Business Name		Name of Business Entity			PRAIRIE TRAVELERS, INC.
		The file number of this entity on the records of the Montana Secretary of State is			D113411
		Country of Organization			United States
		State of Organization			Montana
		Annual Report Year			2023
		Business Purpose			NONE STATED
Shares					
	Share Type	Series	Shares Authorized	Shares Issued	Share Par Value
	Common		10000	1000	0.0000
Business Mailing Address of Principal Office		Address			130 3RD ST S STE 2 GLASGOW, MT 59230
Business Physical Address of Principal Office		Address			130 3RD ST S STE 2 GLASGOW, MT 59230
The registered agent on record is:		Registered Agent			BARBARA LAWSON Non-Commercial Registered Agent Agent Number RA00273444 Email Address Website Physical Address 130 3RD ST S STE 2 GLASGOW, MT 59230 Mailing Address 130 3RD ST S SUITE 2 GLASGOW, MT 59230
Select the Type of Change					

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Select one if a registered agent change is needed:

Directors

Full Name	Business Mailing Address	Position	Email Address
<input checked="" type="checkbox"/> EUGENE C LAWSON	7740 SCHAFER RD BOZEMAN, MT 59715	Director	
<input checked="" type="checkbox"/> BARBARA LAWSON	7740 SCHAFER RD BOZEMAN, MT 59715	Director	

Officers

Full Name	Business Mailing Address	Position	Email Address
<input checked="" type="checkbox"/> EUGENE C LAWSON	7740 SCHAFER RD BOZEMAN, MT 59715	Treasurer	
<input checked="" type="checkbox"/> EUGENE C LAWSON	7740 SCHAFER RD BOZEMAN, MT 59715	Secretary	
<input checked="" type="checkbox"/> BARBARA LAWSON	7740 SCHAFER RD BOZEMAN, MT 59715	President	
<input checked="" type="checkbox"/> SHAWN W LAWSON	875 HURLY DRIVE GLASGOW, MT 59230	Other Officer	

Declarations

- I understand that the information I enter into the online system is public information and will appear online and on copy requests exactly as I key it into the system.
- I have been authorized by the business entity to file this document online.
- I, HEREBY SWEAR AND/OR AFFIRM, under penalty of law, including criminal prosecution, that the facts contained in this document are true. I certify that I am signing this document as the person(s) whose signature is required, or as an agent of the person(s) whose signature is required, who has authorized me to place his/her signature on this document.

Signature

Attorney in Fact Prairie Travelers, Inc CHMS PC 02/22/2023
 Signer's Capacity On behalf of Sign Here Date

Position Authorized Agent

Daytime Contact

Phone Number (406) 228-9391
 Email payroll@chmspc.com

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