## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997

STREET ADDRESS.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 27 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 847741

(6)

MILLER & SCHRUEUER FINANCIAL, INC.  Principal Place of Business  220 SOUTH SIXTH STREET SUITE 300 MINNEAPOLIS MN 55440  MINNEAPOLIS MN 55440  MINNEAPOLIS MN 55440							<del>- 11 - 12 - 1 - 2</del>	· · · · · · · · · · · · · · · · · · ·						
US	MIN JOHNU		•	is JS	MIN 33770701	00				3. Date Incorporated or Qualific	ed 3a.	Date of Last Re	eport	
										12/18/1980	0	2/14/1996		
2. Principal Pl	ace of Busic	20	2a. Mailing Address						4. FEI Number	•	Ap:	plied For	ĺ	
21		26	26						41-0901191		No	t Applicable		
Suite Apt. :		27	Suite, Apt #, etc.						5. Certificate of Status Desired		\$8.75 A Fee Re			
City & State	)		City & State						6. Election Campaign Financin	9	\$5.00	May Be	l	
23		28	28						Trust Fund Contribution Added to Fees					
Ζip	<b></b>			Zip			Country			8. This corporation has liability			199.032,	l
24	25			29 30						Florida Statutes		□ No		ĺ
		and Address of Curr	ent Reg	tegistered Agent			-	T 55		10. Name and Address of New	Register	ed Agent		
		TION SYSTEM					81	Nam	e					١
	) S. PINE I					82	2 Street Addre		ess (P.O. Box Number is Not Acceptable)					
PLA	NTATION F	FL 33324					83	<b>├</b> ─						1
								<u></u>						
							84	City			F	EL  85   Zip (	Code	l
office or n agent I at SIGNATURE	egistered ag m famil-ar w	gent, or both, in the Sta ith, and accept the obl	ite of Flo igations	rida, Such cha of, Section 60	ange was a 7.0505, Flo	uthoriz rida St	ed by atutes	y the c	orporatio	oration submits this statement for to on's board of directors. I hereby a	ccept the i	appointment as	s registered registered	
ļ	Signature (gar).	For printed rame of region room	** ****	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	aton)			ent signa	ure require	ed when reinstating)	DAT		- IN 40	Į
12.	PD	OFFICERS A	MD DIK		DELETE	13			1	ADDITIONS/CHANGES TO O		Change	Addition	ĺ
TITLE		DOCED IAMES			DELETE		TITLE					L change	L Addition	١
NAME		, ROGER JAMES	D	D. BOX 789			1.2 NAME 1.3 STREET AODRESS							l
STREET ADORESS		POLIS MN	P.U. D						S					l
CITY-ST-ZUF	SD	PULIS MIN			DELETE		CITY-S	ST-ZIP			·····	Change	Addition	ł
TITLE		I IAMES EDWARD		Ц	DELETE		TITLE					C) Change	Addition	l
NAME	Iverson, James Edward 505 Lomas Santa Fe Dr.						2.2 NAME							f
STREET ADORESS		AAS SANTA PE DR. A BEACH CA						ADDRES	5					1
CHY-S1-7IP	SULANA VS	DEMON UM		<del></del>	DELETE	_	4 CITY-:	ST-ZIP				Change	Addition	ł
TITLE	- <del>-</del>	S, EDWARD JOEL		<u></u>	DECE IE							in nimige	- Populion	1
NAME		JTH SIXTH ST., POE	780				NAME	T addres	_ ا					
STREET ACCRESS		POLIS MN	7 700						<b>`</b>				•	l
CITY-ST-ZIP TITLE	TAS	I OLIO INIT	. ——		DELETE	_	CITY-	51 - ZIP				Change	Addition	
NAME		FF, BRADLEY RAY		4.0			2 NAME					_ ,		İ
STREET ADDRESS	220 SOL	3 789	89			4 3 STREET ADDRESS		s l						
CITY - ST - ZIF	MINNEA					4.4 City-St-ZiP							l	
Title					DELETE	-	TITLE		<del>- </del>	· · · · · · · · · · · · · · · · · · ·	<del> </del>	Change	Addition	1
NAME							NAME					-		I
STREET ADDRESS								T ADDRES	s l					1
CITY-ST-ZIF							CITY-S							1
TITLE					DELETE		TITLE		1			Change	Addition	1

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this friing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR 01/08/97 (612) 376-1500