

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

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000003977 (6)
 1. Corporation Name
MCGRAND & ASSOCIATES, INC.

Principal Place of Business 8990 SPRINGBROOK DRIVE 230 MINNEAPOLIS MN 55433 US	Mailing Address 8990 SPRINGBROOK DRIVE 230 MINNEAPOLIS MN 55433 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8990 Springbrook Dr Suite, Apt. #, etc. 22 Ste 230 City & State 23 Minneapolis mn Zip Country 24 55433 25 US	2a. Mailing Address 26 8990 Springbrook Dr Suite, Apt. #, etc. 27 Ste 230 City & State 28 Minneapolis mn Zip Country 29 55433 30 US	3. Date Incorporated or Qualified 09/01/1993	4. FEI Number 41-1299249	Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
PD	MCGRAND, JEFFREY 478 MYRTLEWOOD CALIMESA CA 92320	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
V	MCGRAND, SCOTT 12535 FREMONT YUCAIPA CA 92399	2.1 TITLE	2.2 NAME
S	MCGRAND-SVOBODA, JILL 4453 LAFAYETTE LANE SPRING PARK MN	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TD	ENERSON, CURTIS 701 82ND AVE. N. BROOKLYN PARK MN 55444	3.1 TITLE	3.2 NAME
D	MCGRAND, LUVERN 6110 SUNSET DRIVE MOUND MN 55364	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
D	BELANGER, LOUIS 6110 SUNSET DRIVE MOUND MN 55364	4.1 TITLE	4.2 NAME
		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
		5.1 TITLE	5.2 NAME
		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
		6.1 TITLE	6.2 NAME
		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 supplemental 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.

SIGNATURE: *Jill McGrand-Svoboda* 2-3-98 (615) 786-6510

CP2E034 (10/97)