

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002619

FILED
Apr 23, 2007
Secretary of State

Entity Name: OSBORNE PROPERTIES GP, LLC

Current Principal Place of Business:

523 SOUTH 8TH STREET
MINNEAPOLIS, MN 55404

New Principal Place of Business:

Current Mailing Address:

523 SOUTH 8TH STREET
MINNEAPOLIS, MN 55404

New Mailing Address:

FEI Number: 41-2019862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ENGELSMA, BRUCE W MGR
Address: 523 SOUTH 8TH STREET
City-St-Zip: MINNEAPOLIS, MN 55404

Title: MGR () Delete
Name: ENGELSMA, DANIEL W MGR
Address: 4210 WEST OLD SHAKOPEE ROAD
City-St-Zip: BLOOMINGTON, MN 55437

Title: MGR () Delete
Name: DIESSNER, DENNIS G MGR
Address: 420 GATEWAY BOULEVARD
City-St-Zip: BURNSVILLE, MN 55337

Title: MGR () Delete
Name: LARSON, MAUREEN A MGR
Address: 420 GATEWAY BOULEVARD
City-St-Zip: BURNSVILLE, MN 55337

Title: MGR () Delete
Name: KAMPF, MARK N MGR
Address: 420 GATEWAY BOULEVARD
City-St-Zip: BURNSVILLE, MN 55337

Title: MGR () Delete
Name: MANTHE, ROSEMARY A MGR
Address: 523 SOUTH 8TH STREET
City-St-Zip: MINNEAPOLIS, MN 55404

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROSEMARY A. MANTHE

S

04/23/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date