

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1-2

96 JUL 29 PM 1:11

DOCUMENT # **P19656 (8)**
1. Corporation Name
H ENTERPRISES INTERNATIONAL, INC.



Principal Place of Business: **ONE FINANCIAL PLAZA SUITE 2300 MINNEAPOLIS MN 55402 US**
Mailing Address: **ONE FINANCIAL PLAZA SUITE 2300 MINNEAPOLIS MN 55402 US**

3. Date Incorporated or Qualified: **06/15/1988**
3a. Date of Last Report: **05/01/1995**
4. FFI Number: **06-1238552**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
22. Suite, Apt. #, etc.
23. City & State
24. Zip
25. Country
26. Suite, Apt. #, etc.
27. City & State
28. Zip
29. Country
30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BERTELSEN, ANITA M.
800 LAUREL OAK DR. #200
NAPLES FL 33983**

81. Name: **C T Corporation System**
82. Street Address (P.O. Box Number is Not Acceptable): **c/o C T Corporation System**
83. **1200 South Pine Island Road**
84. City: **Plantation** FL 85. Zip Code: **33324**

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: *Susan J. Warner*
Signature typed or printed in block below: **Susan J. Warner**

DATE: **7-26-96**

12. OFFICERS AND DIRECTORS

| | | |
|----------------|--|---------------------------------|
| TITLE | P | <input type="checkbox"/> DELETE |
| NAME | BYRNE, JOHN E | |
| STREET ADDRESS | ONE FINANCIAL PLAZA, SUITE 2300 | |
| CITY- ST- ZIP | MINNEAPOLIS MN | |
| TITLE | VAT | <input type="checkbox"/> DELETE |
| NAME | GORMAN, MICHAEL | |
| STREET ADDRESS | ONE FINANCIAL PLAZA, SUITE 2300 | |
| CITY- ST- ZIP | MINNEAPOLIS MN | |
| TITLE | EVPT | <input type="checkbox"/> DELETE |
| NAME | BERTELSEN, ANITA M. | |
| STREET ADDRESS | 800 LAUREL OAK DR #200 | |
| CITY- ST- ZIP | NAPLES FL | |
| TITLE | C | <input type="checkbox"/> DELETE |
| NAME | O'LEARY, RICHARD E. | |
| STREET ADDRESS | 800 LAUREL OAK DR #200 | |
| CITY- ST- ZIP | NAPLES FL | |
| TITLE | SAT | <input type="checkbox"/> DELETE |
| NAME | O'LEARY, NORA | |
| STREET ADDRESS | ONE FINANCIAL PLAZA, STE. 2300 | |
| CITY- ST- ZIP | MINNEAPOLIS MN | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY- ST- ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | see attached list |
| 1.3 STREET ADDRESS | |
| 1.4 CITY- ST- ZIP | |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY- ST- ZIP | |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY- ST- ZIP | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY- ST- ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY- ST- ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY- ST- ZIP | |

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****225.00 ****225.00

Frank

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Susan J. Warner* - Secretary
DATE: **7.11.96**
Original Filing #: **612/343-8291**

CR2E034 (12/95)

2-2 (2)

H ENTERPRISES INTERNATIONAL, INC.

Board of Directors

Richard E. O'Leary
90 East Broadway, Suite 205
P.O. Box 3887
Jackson WY 83001

John E. Byrne
One Financial Plaza, Suite 2300
Minneapolis, MN 55402

Term expires upon date of next annual meeting of Shareholders.

Officers

Chairman

Richard E. O'Leary
90 E. Broadway, Suite 205
P.O. Box 3887
Jackson WY 83001

President

John E. Byrne
One Financial Plaza, Suite 2300
Minneapolis, MN 55402

Vice President, Finance/Treasurer

Susan P. Lewis
One Financial Plaza, Suite 2300
Minneapolis, MN 55402

Vice President, Tax Services

Michael J. Gorman
One Financial Plaza, Suite 2300
Minneapolis, MN 55402

Corporate Secretary/Assistant Treasurer

Nora Q. O'Leary
One Financial Plaza, Suite 2300
Minneapolis, MN 55402

Term expires upon date of next annual meeting of Board of Directors.