


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P22136
 1. Entity Name
RETAIL CONSTRUCTION SERVICES, INC.



Principal Place of Business Mailing Address
 11343 39TH ST NORTH 11343 39TH ST NORTH
 LAKE ELMO, MN 55042 US LAKE ELMO, MN 55042 US



04112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **41-1330800** Applied For / Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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 I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BACHMAN, STEPHEN M.
STREET ADDRESS	11343 39TH ST NORTH
CITY-ST-ZIP	LAKE ELMO, MN 55042
TITLE	VSD
NAME	MIDDLETON, GEORGE J.
STREET ADDRESS	11343 39TH ST NORTH
CITY-ST-ZIP	LAKE ELMO, MN 55042
TITLE	VT
NAME	KUNTZ, GERALD F.
STREET ADDRESS	11343 39TH ST NORTH
CITY-ST-ZIP	LAKE ELMO, MN 55042
TITLE	V
NAME	FLETTY, JONI
STREET ADDRESS	11343 39TH STREET NO
CITY-ST-ZIP	LAKE ELMO, MN 55042
TITLE	V
NAME	WILLS, GARTH
STREET ADDRESS	102 E ROSS, SUITE B
CITY-ST-ZIP	ROCKWELL, TX 75087
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 04/29/06-80205-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gerald F. Kuntz* VT Date 4-11-06 Daytime Phone # 651-704-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR