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PROFIT CORPORATION USINESS REPORT (UBR)	FILEI <b>Apr 07, 200</b> 3
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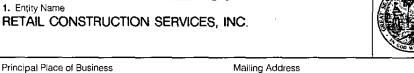
11343 39TH ST NORTH

City & State

Zip

SIGNATURE

RETAIL CONSTRUCTION SERVICES, INC.



11343 39TH ST NORTH

City & State

Zip



LAKE ELMO MN 55042 LAKE ELMO MN 55042 us US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES Applied For

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

Country

Name			
Street Address (P.O. Box Number is Not A	(cceptable)	***	 

41-1330800

7. Name and Address of New Registered Agent


5. Certificate of Status Desired-

4, FEI Number

	City			·			_		F	L	Zip	Code		
stere	ed office	or registe	red a	gent, or	both, ir	n the S	State o	of Florida	. Lan	n fan	niliar	with, a	nd ac	cept

3.	The above named entity submits this statement for the purpose of changing its registered of registered agent, or doth, in the state of ribrida. I am laminar with, and acceptable
	the obligations of registered agent.

(NOTE: Registered Agent signature required when reinstating)

Country

FILE NOW!!!	FEE IS \$150.00
After May 1, 2003	Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Not Applicable

\$8.75 Additional

Make Check	Repartment of State						
10.	OFFICERS AND DIRECTO	RS	11.	AD	DITIONS/CHANGES TO OFFICERS AND	DIRECTORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BACHMAN, STEPHEN M. 11343 39TH ST NORTH LAKE ELMO MN 55042	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	VSD MIDDLETON, GEORGE I. 11343 39TH ST NORTH LAKE ELMO MN 55042	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	· · · · · · ·	Change	Addition
TITLE NAME STREET ADORESS CITY-ST-ZIP	VT KUNTZ, GERALD F. 11343 39TH ST NORTH LAKE ELMO MN 55042	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FLETTY, JONI 11343 39TH STREET NO LAKE ELMO MN 55042	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition i
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WILLS, GARTH 102 E ROSS, SUITE B ROCKWELL TX 75087	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>	Change	Addition

12. I hereby certify that he 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 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 chapter of the proportion of the corporation of the corporation of the corporation of the receiver of 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

SIGNATURE: