

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29726

Entity Name: PLATO, INC.

FILED  
Feb 27, 2008  
Secretary of State

## Current Principal Place of Business:

10801 NESBITT AVE. SOUTH  
BLOOMINGTON, MN 55437 US

## New Principal Place of Business:

## Current Mailing Address:

10801 NESBITT AVE. SOUTH  
BLOOMINGTON, MN 55437 US

## New Mailing Address:

FEI Number: 41-1646390

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR, SUITE 4  
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: MORACHE, MICHAEL A PRESIDE  
Address: 10801 NESBITT AVE SO  
City-St-Zip: BLOOMINGTON, MN 55437 US

Title: CFO ( ) Delete  
Name: RUECKL, ROBERT J CFO  
Address: 10801 NESBITT AVE SO  
City-St-Zip: BLOOMINGTON, MN 55437 US

Title: CHMN ( ) Delete  
Name: SMITH, DAVID W CHMN  
Address: 10801 NESBITT AVE SO  
City-St-Zip: BLOOMINGTON, MN 55437 US

Title: DIR ( ) Delete  
Name: SANDERS, J T DIRECTO  
Address: 4545 SOUTH MONACO STREET  
City-St-Zip: DENVER, CO 80237 US

Title: DIR ( ) Delete  
Name: KNIGHT, SUSAN E DIRECTO  
Address: 14000 TECHNOLOGY DRIVE  
City-St-Zip: EDEN PRARIE, MN 55433 US

Title: DIR ( ) Delete  
Name: DUFFY, JOSEPH E DIRECTO  
Address: 10919 LARKMEADE LANE  
City-St-Zip: POTOMAC, MN 20854 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
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 exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J RUECKL

CFO

02/27/2008

Electronic Signature of Signing Officer or Director

Date