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Feb 10, 1999 8:00am
Secretary of State

02-10-1999 90053 050 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 838999

1. Corporation Name

JOHN G. KINNARD AND COMPANY INCORPORATED

Principal Place of Business

920 SECOND AVE S
MINNEAPOLIS MN 55402
US

Mailing Address

920 SECOND AVE S
MINNEAPOLIS MN 55402
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/23/1977

4. FEI Number

41-0853893

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 owes the current year Intangible
Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| | | |
|----------------|----------------------|--------|
| TITLE | VD | DELETE |
| NAME | SASS, DANIEL R | |
| STREET ADDRESS | 3705 ABBOTT AVE. S. | |
| CITY-ST-ZIP | MINNEAPOLIS MN 55410 | |
| TITLE | CD | DELETE |
| NAME | FARLEY, WILLIAM F. I | |
| STREET ADDRESS | 350 SOUTH BROWN ROAD | |
| CITY-ST-ZIP | LONG LAKE MN 55356 | |
| TITLE | VSD | DELETE |
| NAME | GIFFORD, GERALD M | |
| STREET ADDRESS | 17320 138TH AVE N | |
| CITY-ST-ZIP | DAYTON MN | |
| TITLE | VD | DELETE |
| NAME | KEARNEY, ARTHUR J | |
| STREET ADDRESS | 549 N CENTRAL AVE | |
| CITY-ST-ZIP | WAYZATA MN | |
| TITLE | VD | DELETE |
| NAME | MOORE, THOMAS E | |
| STREET ADDRESS | 111 W ELMWOOD PL | |
| CITY-ST-ZIP | MINNEAPOLIS MN | |
| TITLE | VD | DELETE |
| NAME | O'CONNELL, ANDREW J | |
| STREET ADDRESS | 2710 ASHBOURNE ROAD | |
| CITY-ST-ZIP | MINNETONKA MN 55391 | |

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|-----------------|
| 1.1 TITLE | Change Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | Change Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY-ST-ZIP | |
| 3.1 TITLE | Change Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | Change Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | Change Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | Change Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

14. I hereby certify that the 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)