

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006206

Entity Name: CAPELLA UNIVERSITY, INC.

FILED
Mar 21, 2005
Secretary of State

Current Principal Place of Business:

222 S. NINTH STREET, FLOOR 20
MINNEAPOLIS, MN 55402

New Principal Place of Business:

225 SOUTH SIXTH STREET, FLOOR 9
MINNEAPOLIS, MN 55402

Current Mailing Address:

225 SOUTH SIXTH STREET, FLOOR 9
MINNEAPOLIS, MN 55402

New Mailing Address:

FEI Number: 41-1740392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATRICK, PAMELA DR
5911 RIVERSIDE DR.
PORT ORANGE, FL 32127 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: P () Delete
Name: SHANK, STEPHEN G
Address: 222 S. NINTH STREET, FLOOR 20
City-St-Zip: MINNEAPOLIS, MN 55402

Title: V () Delete
Name: SCHROEDER, PAUL
Address: 222 S. NINTH STREET, FLOOR 20
City-St-Zip: MINNEAPOLIS, MN 55402

Title: S () Delete
Name: THOM, GREGORY
Address: 222 S. NINTH STREET, FLOOR 20
City-St-Zip: MINNEAPOLIS, MN 55402

Title: T () Delete
Name: GAYLORD, JOSEPH
Address: 222 S. NINTH STREET, FLOOR 20
City-St-Zip: MINNEAPOLIS, MN 55402

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHANK, STEPHEN G MR
Address: 225 S. SIXTH STREET, 9TH FLOOR
City-St-Zip: MINNEAPOLIS, MN 55402

Title: V (X) Change () Addition
Name: SCHROEDER, PAUL
Address: 225 S. SIXTH STREET, 9TH FLOOR
City-St-Zip: MINNEAPOLIS, MN 55402

Title: S (X) Change () Addition
Name: THOM, GREGORY MR
Address: 225 S. SIXTH STREET, 9TH FLOOR
City-St-Zip: MINNEAPOLIS, MN 55402

Title: T (X) Change () Addition
Name: MARTIN, LOIS
Address: 225 S. SIXTH STREET, 9TH FLOOR
City-St-Zip: MINNEAPOLIS, MN 55402

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHELLE WESTON

MS

03/21/2005

Electronic Signature of Signing Officer or Director

_____ Date