

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 18, 2008 8:00 am**  
**Secretary of State**

07-18-2008 90014 016 \*\*\*550.00

**DOCUMENT # F03000003819**

1. Entity Name  
FIBERSTAR, INC.



Principal Place of Business  
3023 15TH ST SW  
WILLMAR, MN 56201

Mailing Address  
3023 15TH ST SW  
WILLMAR, MN 56201

60043063



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07082008

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

91-1886062

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVENUE SOUTH  
SUITE 101-330  
NAPLES, FL 34102

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME CHAPMAN, TRISTAN  
STREET ADDRESS 90 LIVE OAK LANE  
CITY-ST-ZIP LABELLE, FL 33935

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PTD ☐ Delete  
NAME LINDQUIST, DALE  
STREET ADDRESS 3032 15TH ST S W  
CITY-ST-ZIP WILMAR, MN 56201

TITLE D ☐ Change ☒ Addition  
NAME MCINTOSH, ROBERT  
STREET ADDRESS 10104 SE 187TH STREET  
CITY-ST-ZIP RENTON, WA 98055

TITLE SD ☐ Delete  
NAME HEALY, STEVEN  
STREET ADDRESS N8269 1015TH STREET  
CITY-ST-ZIP RIVER FALLS, WI 54022

TITLE D ☐ Change ☒ Addition  
NAME SAMUELS, LEONARD  
STREET ADDRESS 1011 CENTENNIAL ROAD  
CITY-ST-ZIP NARBERTH, PA 19072

TITLE D ☐ Delete  
NAME SEVERANCE, H. LEIGH  
STREET ADDRESS 14282 CALEY AVENUE  
CITY-ST-ZIP AURORA, CO 80016

TITLE D ☐ Change ☒ Addition  
NAME FRIEDMAN, PAUL  
STREET ADDRESS 6513 HIGH MEADOW COURT  
CITY-ST-ZIP LONG GROVE, IL 60047

TITLE CD ☐ Delete  
NAME COONROD, RICHARD  
STREET ADDRESS 7133 GLEASON ROAD  
CITY-ST-ZIP EDINA, MN 554891610

TITLE CD ☒ Change ☐ Addition  
NAME COONROD, RICHARD  
STREET ADDRESS 5850 OPUS PARKWAY # 150  
CITY-ST-ZIP MINNETONKA, MN 55343

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PTD ☒ Change ☐ Addition  
NAME LINDQUIST, DALE  
STREET ADDRESS 3023 15TH STREET SW  
CITY-ST-ZIP WILLMAR, MN 56201

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:

*DALE LINDQUIST* DALE LINDQUIST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/9/08

Daytime Phone #

320-231-829