

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842241

FILED
Apr 13, 2009
Secretary of State

Entity Name: UNIVERSITY OF MINNESOTA FOUNDATION

Current Principal Place of Business:

200 OAK ST SE
STE 500
MINNEAPOLIS, MN 554552010 US

New Principal Place of Business:

Current Mailing Address:

200 OAK ST SE
STE 500
MINNEAPOLIS, MN 554552010 US

New Mailing Address:

FEI Number: 41-6042488 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRANKE, DONALD T
849 7TH AVE, S
NAPLES, FL 33940 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FISCHER, GERALD B.
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

Title: CD () Delete
Name: KAPLAN, ELLIOT S
Address: 200 OAK ST SE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

Title: TD () Delete
Name: NAGORSKE, LYNN A
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

Title: SD () Delete
Name: HUBBARD, STANLEY S.
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

Title: V () Delete
Name: KIRK, JUDY Y.
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

Title: V () Delete
Name: PICKARD, KATHLEEN L
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOLDSTEIN, L. STEVEN
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

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

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

Title: SD (X) Change () Addition
Name: HUBBARD, STANLEY S
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

Title: VCD (X) Change () Addition
Name: JOHNSON, B. KRISTINE
Address: 200 OAK ST SE STE 500
City-St-Zip: MINNEAPOLIS, MN 554552010

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN L. PICKARD

VCFO

04/13/2009

Electronic Signature of Signing Officer or Director

Date