

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001979

FILED  
Jan 05, 2010  
Secretary of State

**Entity Name:** ARTHUR A. HIRMAN AGENCY, INC.

**Current Principal Place of Business:**

4001 W RIVER PKWY  
ROCHESTER, MN 55903

**New Principal Place of Business:**

5200 MEMBERS PARKWAY NW  
ROCHESTER, MN 55903

**Current Mailing Address:**

P.O.BOX 6887  
ROCHESTER, MN 55903

**New Mailing Address:**

FEI Number: 41-0824922      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: VP  
Name: SNYDER, MIKE  
Address: 5200 MEMBERS PARKWAY NW  
City-St-Zip: ROCHESTER, MN 55903

Title: D  
Name: MACKIN, PAUL  
Address: 5200 MEMBERS PARKWAY NW  
City-St-Zip: ROCHESTER, MN 55903

Title: S  
Name: STAFFON, KATE  
Address: 5200 MEMBERS PARKWAY NW  
City-St-Zip: ROCHESTER, MN 55901

Title: T  
Name: BECK, DAN  
Address: 5300 MEMBERS PKWY  
City-St-Zip: ROCHESTER, MN 55901

I hereby 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 all other like empowered.

SIGNATURE: KATE STAFFON

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01/05/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date