

**2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 24, 2017  
Secretary of State  
CC3294093913**

DOCUMENT# F15000002857

**Entity Name:** ANNE CARLSEN CENTER, INC.

**Current Principal Place of Business:**

701 - 3RD ST NW  
JAMESTOWN, ND 58401

**Current Mailing Address:**

P O BOX 8000  
JAMESTOWN, ND 58402-8000 US

**FEI Number: 87-0694180**

**Certificate of Status Desired: No**

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

REGISTERED AGENTS, INC.  
3030 N ROCKY POINT DR  
STE 150A  
TAMPA, FL 33607 US

*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

**Officer/Director Detail :**

Title CEO  
Name MONSON, ERIC  
Address 701-3RD ST NW - P O BOX 8000  
City-State-Zip: JAMESTOWN ND 58401

Title COO  
Name EISSINGER, TIM  
Address 701-3RD ST NW - P O BOX 8000  
City-State-Zip: JAMESTOWN ND 58401

Title CFO  
Name JOHNSON, DANIEL  
Address 701-3RD ST NW - P O BOX 8000  
City-State-Zip: JAMESTOWN ND 58401

Title CDO  
Name KIRBY, PATRICK  
Address 701-3RD ST NW - P O BOX 8000  
City-State-Zip: JAMESTOWN ND 58401

Title HRD  
Name OLSON, PATTY  
Address 701-3RD ST NW - P O BOX 8000  
City-State-Zip: JAMESTOWN ND 58401

Title DIRECTOR OF INFORMATION & TECHNOLOGY  
Name BROWNELL, SAM  
Address 701-3RD ST NW - P O BOX 8000  
City-State-Zip: JAMESTOWN ND 58401

Title DIRECTOR OF MANAGEMENT SYSTEMS  
Name WIEST , KRESHA  
Address 701 - 3RD ST NW - P O BOX 8000  
City-State-Zip: JAMESTOWN ND 58401

Title CHAIRMAN  
Name HUBER, HARVEY  
Address 622 - 7TH STREET LOOP NW  
City-State-Zip: JAMESTOWN ND 58401

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

**SIGNATURE: ERIC MONSON**

**CHIEF EXECUTIVE  
OFFICER**

**04/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VICE CHAIRMAN  
Name STOUTD, CASEY  
Address 3122 WEST LAKESIDE ROAD  
City-State-Zip: JAMESTOWN ND 58401

Title SECRETARY  
Name SEAWORTH, JANET  
Address 1733 VALLEY DR  
City-State-Zip: BISMARCK ND 585077127

Title D  
Name FURNESS, BRUCE  
Address 311 - 11TH AVE S  
UNIT 202  
City-State-Zip: FARGO ND 58103

Title DIRECTOR  
Name HANSON, MATTHEW  
Address 210 WEST 89TH STREET  
5J  
City-State-Zip: NEW YORK NY 10024

Title DIRECTOR  
Name MATHISON, TAMARA  
Address 300 - 2ND AVENEUE NE  
City-State-Zip: JAMESTOWN ND 58401

Title DIRECTOR  
Name WILFAHRT, KRISTI  
Address 3801 SOUTH 11TH STREET, UNIT A  
City-State-Zip: GRAND FORKS ND 58201

Title TREASURER  
Name POOLMAN, NICOLE  
Address 3609 BOGEY DRIVE  
City-State-Zip: BISMARCK ND 58503

Title D  
Name OFFUTT, SUE PHD  
Address 29923 NEVADA ROAD  
City-State-Zip: CASHTON WI 54619

Title D  
Name QUANRUD, MYRA DR  
Address 2430 - 20TH ST SW  
City-State-Zip: JAMESTOWN ND 58401

Title DIRECTOR  
Name ROLFSTAD, THOMAS  
Address 1125 - 2ND AVENUE EAST  
City-State-Zip: WILLISTON ND 58802

Title DIRECTOR  
Name SCHWEITZER, ALEX  
Address 1610 - 3RD AVENUE NE  
City-State-Zip: JAMESTOWN ND 58401