

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

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
7901 4TH STREET N,
SUITE 300
ST.PETERSBURG, FL 33702 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 EISSINGER, TIM
Address 701-3RD ST NW - P O BOX 8000
City-State-Zip: JAMESTOWN ND 58401

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

Title CFO
Name SYVERSON, KRISTIN
Address 701 - 3RD ST NW
City-State-Zip: JAMESTOWN ND 58401

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

Title HRD
Name MEYER, LAURIE
Address 701 - 3RD ST NW
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 STOUTD, CASEY
Address 3122 WEST LAKESIDE ROAD
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: TIM EISSINGER

CHIEF EXECUTIVE OFFICER

04/24/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VICE CHAIRMAN
Name FURNESS, BRUCE
Address 311 - 11TH AVENUE S
UNIT #202
City-State-Zip: FARGO ND 58103

Title SECRETARY
Name SCHWEITZER, ALEX
Address 1200 7TH STREET SW
#102
City-State-Zip: JAMESTOWN ND 58401

Title DIRECTOR
Name HUBER, HARVEY
Address 622 - 7TH ST. LOOP NW
City-State-Zip: JAMESTOWN ND 58401

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

Title DIRECTOR
Name MONSON, ERIC
Address 4254 COVENTRY DRIVE S
City-State-Zip: FARGO ND 58104

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

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

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

Title DIRECTOR
Name PETERSON, POLLY
Address 809 16TH STREET NE
City-State-Zip: JAMESTOWN ND 58401

Title DIRECTOR
Name NELSON, LAUREL
Address 2228 COLLEGE WAY
City-State-Zip: FERGUS FALLS MN 56537