

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 853713

**Entity Name:** ANDERSON PRODUCTS, INC.

**Current Principal Place of Business:**

1100 OLD HIGHWAY 8 NW  
NEW BRIGHTON, MN 55112

**Current Mailing Address:**

1100 OLD HIGHWAY 8 NW  
NEW BRIGHTON, MN 55112 US

**FEI Number:** 41-0991873

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CFO, TREASURER, ASST.  
SECRETARY  
Name LYDON, THOMAS A.  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title DIRECTOR, CHAIRMAN OF THE  
BOARD  
Name ANDERSON, LEE R. SR.  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title DIRECTOR, SECRETARY  
Name BEADIE, WILLIAM M.  
Address 705 MONTCALM PLACE  
City-State-Zip: ST. PAUL MN 55116

Title ASSISTANT TREASURER  
Name HATFIELD, SCOTT  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title PRESIDENT  
Name KIM, FRED  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

*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:** SCOTT HATFIELD

**ASSISTANT TREASURER** 04/15/2015

Electronic Signature of Signing Officer/Director Detail

Date