

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000853

Entity Name: 3M ELECTRONIC MONITORING, INC.**Current Principal Place of Business:**1838 GUNN HWY
ODESSA, FL 60546**Current Mailing Address:**3M CENTER
BLDG 224-5N-40
ST PAUL, MN 55144 US**FEI Number:** 13-4088052**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH 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	P
Name	LANG, ALEJANDRA
Address	1838 GUNN HWY
City-State-Zip:	ODESSA FL 33556

Title	TREASURER
Name	KROHN, SCOTT
Address	3M CENTER BLDG 224-5N-40
City-State-Zip:	ST PAUL MN 55144

Title	CFO
Name	KADOSH-TAMARI, ILAN
Address	1838 GUNN HWY
City-State-Zip:	ODESSA FL 33556

Title	S
Name	OLSON, PETER L
Address	3M CENTER
City-State-Zip:	ST PAUL MN 55144

Title	AS
Name	FARICY, MAUREEN
Address	3M CENTER, BLDG 220-9E-02
City-State-Zip:	ST. PAUL MN 55144

Title	AT
Name	TORSETH, KIMBERLY M
Address	3M CENTER, BUILDING 224-5N-40
City-State-Zip:	ST PAUL MN 55144

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: KIMBERLY M TORSETH

ASSISTANT TREASURER 03/21/2014

Electronic Signature of Signing Officer/Director Detail_____
Date