

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000004069

**Entity Name:** JAMAR INDUSTRIAL CONTRACTORS INC.

**Current Principal Place of Business:**

1100 OLD HIGHWAY 8 NW  
NEW BRIGHTON, MN 55112

**FILED**  
**Apr 05, 2022**  
**Secretary of State**  
**4571781001CC**

**Current Mailing Address:**

INDUSTRIAL CONTRACTORS, INC.,  
PO BOX 692 245 W. SECOND STREET  
MOUNTAIN VIEW, WY 82939 US

**FEI Number: 41-1509431**

**Certificate of Status Desired: No**

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

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: KIMBERLY LAUGHREY- ASST. SECRETARY**

**04/05/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title ASSISTANT SECRETARY  
Name DRYKE, MICHAEL  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title DIRECTOR  
Name BECKER, RUSSELL A.  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title SECRETARY  
Name FIKE, ANDREA M.  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

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

Title DIRECTOR  
Name KRUMM, KEVIN  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title TREASURER  
Name BETTMANN, KRISTEN  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title GENERAL MANAGER, BARTINGALE  
DIVISION  
Name BOWE, CHAD  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

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

**SIGNATURE: SCOTT HATFIELD**

**ASSISTANT TREASURER**

**04/05/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title GENERAL MANAGER, CMS DIVISION  
Name BRADFORD, BEN  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

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

Title VP, INDUSTRIAL  
Name OSTERLING, KEVIN  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

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

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

Title VP, ICI DIVISION  
Name HAMMES, JEFF  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title VP, SERVICE  
Name SWANSON, MARK  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112