

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 829705

FILED
Apr 02, 2003
Secretary of State

Entity Name: I. C. SYSTEM, INC.

Current Principal Place of Business:

444 EAST HIGHWAY 96
P.O. BOX 64444
ST. PAUL, MN 55127 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 64444
444 EAST HIGHWAY 96
ST. PAUL, MN 55164

New Mailing Address:

FEI Number: 41-0739183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: COB () Delete
Name: ERICKSON, JOHN A,
Address: 34 DELLWOOD AVE.
City-St-Zip: ST. PAUL, MN 55110

Title: CEO () Delete
Name: ERICKSON, BARBARA,
Address: 34 DELLWOOD AVENUE
City-St-Zip: ST. PAUL, MN 55110

Title: P () Delete
Name: RAPP, KENNETH
Address: 9121 96TH STREET N.
City-St-Zip: ST. PAUL, MN 55115

Title: S () Delete
Name: MELTON, ELIZABETH
Address: 2150 OTTER LAKE DR
City-St-Zip: WHITE BEAR LAKE, MN 55110

Title: TCFO () Delete
Name: HEINBIGNER, KURT
Address: 7384 MOONLIGHT LANE
City-St-Zip: EDEN PRAIRIE, MN 55346

Title: BOD () Delete
Name: ERICKSON, JOHN A
Address: 34 DELLWOOD AVE.
City-St-Zip: ST. PAUL, MN 55110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ERICKSON, JOHN A IV
Address: 185 GLADSTONE CIRCLE
City-St-Zip: LINO LAKES, MN 55014

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KENNETH RAPP

PRES

04/02/2003

Electronic Signature of Signing Officer or Director

Date