2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2008
Secretary of State

DOCUMENT# 838422

Entity Name: SCHWAN'S HOME SERVICE, INC.

Current Principal Place of Business:

115 WEST COLLEGE DRIVE
MARSHALL, MN 56258

New Principal Place of Business:

Current Mailing Address:

115 WEST COLLEGE DRIVE
MARSHALL, MN 56258

New Mailing Address:

FEI Number: 41-0879087 **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: DT ( ) Delete
Name: BURR, TRACY
Address: 115 WEST COLLEGE DRIVE
City-St-Zip: MARSHALL, MN 56258

Title: PCEO ( ) Delete
Name: OBERKFELL, LAWRENCE
Address: 115 W COLLEGE DRIVE
City-St-Zip: MARSHALL, MN 56258

Title: DS ( ) Delete
Name: SATTLER, BRIAN R
Address: 115 W. COLLEGE DR
City-St-Zip: MARSHALL, MN 56258

Title: CFO ( ) Delete
Name: PELLERIN, CRAIG
Address: 115 W. COLLEGE DR
City-St-Zip: MARSHALL, MN 56258

Title: D ( ) Delete
Name: PIPPIN, M. LENNY
Address: 115 W. COLLEGE DR
City-St-Zip: MARSHALL, MN 56258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FLACK, GREGORY
Address: 115 WEST COLLEGE DRIVE
City-St-Zip: MARSHALL, MN 56258

Title: PCEO (X) Change ( ) Addition
Name: MCNAIR, SCOTT
Address: 115 W COLLEGE DRIVE
City-St-Zip: MARSHALL, MN 56258

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

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

Title: D (X) Change ( ) Addition
Name: KRUK, BERNADETTE M
Address: 115 W. COLLEGE DR
City-St-Zip: MARSHALL, MN 56258

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BRIAN SATTLER S 03/19/2008

Electronic Signature of Signing Officer or Director Date