


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90062 036 ****70.00

DOCUMENT # 842241

1. Entity Name
UNIVERSITY OF MINNESOTA FOUNDATION



Principal Place of Business
**200 OAK ST SE
 STE 500
 MINNEAPOLIS, MN 55455-2010 US**

Mailing Address
**200 OAK ST SE
 STE 500
 MINNEAPOLIS, MN 55455-2010 US**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

400



03312008 Chg-NP CR2E037 (12/06)

4. FEI Number
41-6042488

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**FRANKE, DONALD T
 849 7TH AVE, S
 NAPLES, FL 33940**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FISCHER, GERALD B. 200 OAK ST SE STE 500 MINNEAPOLIS, MN 554552010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD FRISWOLD, FRED R 200 OAK ST SE STE 500 MINNEAPOLIS, MN 554552010 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Kaplan, Elliot S. 200 oak st se, STE 500 Minneapolis, MN 55455-2010 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NAGORSKE, LYNN A 200 OAK ST SE STE 500 MINNEAPOLIS, MN 554552010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HUBBARD, STANLEY S. 200 OAK ST SE STE 500 MINNEAPOLIS, MN 554552010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KIRK, JUDY Y. 200 OAK ST SE STE 500 MINNEAPOLIS, MN 554552010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PICKARD, KATHLEEN L 200 OAK ST SE STE 500 MINNEAPOLIS, MN 554552010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathleen L. Pickard Date: 3/31/08 Daytime Phone #: 612-624-3333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT 40061739

#842241

**UNIVERSITY OF MINNESOTA FOUNDATION
200 OAK STREET SE, STE 500
MINNEAPOLIS, MN 55455-2010**

**ADDITIONAL OFFICERS AND DIRECTORS
DOCUMENT #842241
2008**

D / VC

**Johnson, B. Kristine
200 Oak Street SE, Ste 500
Minneapolis, MN 55455-2010**

V

**Meyer, Lisa M.
200 Oak Street SE, Ste 500
Minneapolis, MN 55455-2010**

V

**Odegard, Robert J.
200 Oak Street SE, Ste 500
Minneapolis, MN 55455-2010**

V

**Aagaard, James G.
200 Oak Street SE, Ste 500
Minneapolis, MN 55455-2010**

V

**Pelzl, Julie E.
200 Oak Street SE, Ste 500
Minneapolis, MN 55455-2010**

V

**Goldstein, L. Steven
200 Oak Street SE, Ste 500
Minneapolis, MN 55455-2010**