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Jan 29 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 844542 (1)

1. Corporation Name

MINNEAPOLIS TEACHERS' RETIREMENT FUND ASSOCIATIO  
N, INC.

Principal Place of Business

Mailing Address

730 SECOND AVE., S.  
MINNEAPOLIS MN 55402

730 SECOND AVE., S.  
MINNEAPOLIS MN 55402



3. Date Incorporated or Qualified

11/06/1979

4. FEI Number

41-0415950

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST.  
STE. 105  
TALLAHASSEE FL 32301

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
HANSON, DOUGLAS A.  
STREET ADDRESS  
2220 E. 56TH STREET  
CITY-ST-ZIP  
MINNEAPOLIS MN

TITLE ☐ DELETE

NAME  
DOWNING, ANN  
STREET ADDRESS  
4575 W. 80TH ST. CIR.#333  
CITY-ST-ZIP  
BLOOMINGTON MN

TITLE ☐ DELETE

NAME  
MOEN, NORMAN  
STREET ADDRESS  
2019 EWING AVE S  
CITY-ST-ZIP  
MINNEAPOLIS MN

TITLE ☐ DELETE

NAME  
CARTER, BIRDIE  
STREET ADDRESS  
1957 LARPENITEUR W  
CITY-ST-ZIP  
ST PAUL MN

TITLE ☐ DELETE

NAME  
OSTBY, SILVIA  
STREET ADDRESS  
542-2 LOVELL AVE  
CITY-ST-ZIP  
ROSEVILLE MN

TITLE ☐ DELETE

NAME  
RISSER, LARRY  
STREET ADDRESS  
4904 THOMAS AVE., S.  
CITY-ST-ZIP  
MINNEAPOLIS MN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VP  
Ann Downing  
5746 Highland Courts Dr.  
Bloomington MN 55437

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Signature of Officer or Director

1-7-98 612-338-7865

CR2E037 (10/97)