

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **844726** (0)

1. Corporation Name  
**SMARTE CARTE, INC.**



Principal Place of Business

4455  
WHITE BEAR LAKE MN 55110  
US

Mailing Address

4455 WHITE BEAR PKWY  
ST PAUL MN 55110  
US

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date incorporated or Qualified  
**11/30/1979**

3a. Date of Last Report  
**04/17/1995**

4. FEI Number

**41-0965374**

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

**\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes  No

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

**FL**

B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
VP	SOLBERG, CONRAD J.	5357 W. BALD EAGLE BLVD.	WHITE BEAR LAKE MN	<input type="checkbox"/>
T	WIEGEL, MICHAEL M.	188 MEADOWWOOD LANE	VADNAIS HEIGHTS MN	<input checked="" type="checkbox"/>
PD	MUELLNER, JAMES M	1777 STILLWATER STREET	WHITE BEAR LAKE, MN00000	<input checked="" type="checkbox"/>
S	LEWANDOWSKI, MARK S.	2480 E COUNTY RD F	WHITE BEAR LAKE MN	<input checked="" type="checkbox"/>
D	MUELLNER, MARILYN L.	2446 E COUNTY RD F	WHITE BEAR LAKE MN	<input checked="" type="checkbox"/>
D	ODOM, ROBERT J.	2515 MANITOU ISLAND	WHITE BEAR LAKE MN	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President, Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Chairman, CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Grant McLennan	
2.3 STREET ADDRESS	2504 Manitou Island	
2.4 CITY - ST - ZIP	White Bear Lake, MN 55110	
3.1 TITLE	Secretary, CFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Garret S Roosma	
3.3 STREET ADDRESS	12175 Upper Heather Ave N	
3.4 CITY - ST - ZIP	Hugo, MN 55038	
4.1 TITLE	Sr. V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Brad Stanius	
4.3 STREET ADDRESS	4160 Myrtle Ave	
4.4 CITY - ST - ZIP	White Bear Lake, MN 55110	
5.1 TITLE	V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Eugene R. Pasten	
5.3 STREET ADDRESS	4180 Juster Trail	
5.4 CITY - ST - ZIP	Stillwater, MN 55082	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Eugene R. Pasten  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 (612) 429-3614  
Date Daytime Phone #

CR2E034 (12/95)