

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848338

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: RED WING SHOE COMPANY, INC.

## Current Principal Place of Business:

314 MAIN ST  
RIVERFRONT CENTRE  
RED WING, MN 55066

## New Principal Place of Business:

## Current Mailing Address:

314 MAIN ST  
RIVERFRONT CENTRE  
RED WING, MN 55066

## New Mailing Address:

FEI Number: 41-0498220      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC,  
526 E. PARK AVENUE  
TALLAHASSEE, FL 32301      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: CEOP ( ) Delete  
Name: DAVID, MUNPAY  
Address: 314 MAIN STREET  
City-St-Zip: RED WING, MN

Title: VP ( ) Delete  
Name: TIM, HUTCHSON  
Address: 314 MAIN STREET  
City-St-Zip: RED WING, MN 55066

Title: S ( ) Delete  
Name: BAKER, DAVID A  
Address: 314 MAIN STREET  
City-St-Zip: RED WING, MN 55066

Title: VP ( ) Delete  
Name: DIETZMAN, JERRY  
Address: 314 MAIN STREET  
City-St-Zip: RED WING, MN

Title: T ( ) Delete  
Name: BAWEK, RICK  
Address: 314 MAIN STREET  
City-St-Zip: RED WING, MN

Title: AS ( ) Delete  
Name: CRIDER, CARIS  
Address: 314 MAIN ST  
City-St-Zip: RED WING, MN 55066

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COOP (X) Change ( ) Addition  
Name: DAVID, MUNPAY  
Address: 314 MAIN STREET  
City-St-Zip: RED WING, MN

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

Title: AS (X) Change ( ) Addition  
Name: CRIDER, CHRIS  
Address: 314 MAIN ST  
City-St-Zip: RED WING, MN 55066

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: CHRIS CRIDER

AS

01/06/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date