



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 23, 2007 08:00 AM
Secretary of State

DOCUMENT # 850164 1. Entity Name BELT LINE PROPERTIES, INC.	
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Principal Place of Business 3440 BELT LINE BLVD. #100 ST LOUIS PARK, MN 55416	Mailing Address 3440 BELT LINE BLVD. #100 ST LOUIS PARK, MN 55416
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DO NOT WRITE IN THIS SPACE



07172007 No Chg-P CR2E034 (11/05)

4. FEI Number 41-0730106	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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


FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000770044 07/23/07-80005-021 550.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MCCAIN, JOHN D 3440 BELT LINE BLVD #100 ST. LOUIS PARK, MN 55416
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 607, 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:  **7-17-07 952 921-4518**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #