

FILE NOW: FILING FEE AFT., MAY 1 IS \$550.00

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **851830** (0)
1. Corporation Name
KRAUS-ANDERSON CONSTRUCTION COMPANY

Principal Place of Business 525 SOUTH 8TH STREET MINNEAPOLIS MN 55404	Mailing Address 525 SOUTH 8TH STREET MINNEAPOLIS MN 55404-1030
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/09/1982	3a. Date of Last Report 2-17-97
21	22	23	24	4. FEI Number 41-0808757	Applied For <input type="checkbox"/> Not Applicable
25		26		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
27		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
29		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	FL	B5

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	Chairman and CEO/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGELSMAN, BRUCE W.	1.2 NAME	Engelsma, Bruce W.
STREET ADDRESS	990 PARTENWOOD ROAD	1.3 STREET ADDRESS	990 Partenwood Road
CITY-ST-ZIP	ORONO MN	1.4 CITY-ST-ZIP	Orono, MN
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAEGER, WILLIAM J., JR.	2.2 NAME	
STREET ADDRESS	10241 10TH AVE CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BLOOMINGTON MN	2.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHLETTY, JOHN W.	3.2 NAME	
STREET ADDRESS	26 LANGER CIRCLE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST PAUL MN	3.4 CITY-ST-ZIP	
TITLE	VS <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DREIS, JEROLD	4.2 NAME	
STREET ADDRESS	9840 53RD ST. NORTH	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE ELMO MN	4.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOEBEL, JANICE R.	5.2 NAME	400002518764
STREET ADDRESS	5300-29TH AVENUE SOUTH	5.3 STREET ADDRESS	-05/11/98--01085--034
CITY-ST-ZIP	MINNEAPOLIS MN	5.4 CITY-ST-ZIP	***150.00
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	Please see attached list
STREET ADDRESS		6.3 STREET ADDRESS	for all officers and directors
CITY-ST-ZIP		6.4 CITY-ST-ZIP	2/5/7

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 24 if changed, or not at all, with an address.