

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000207

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: ALLEN INTERACTIONS INC.

## Current Principal Place of Business:

3922 COCONUT PALM DRIVE  
SUITE 210  
TAMPA, FL 33619

## New Principal Place of Business:

## Current Mailing Address:

1120 CENTRE POINTE DRIVE  
SUITE 800  
MENDOTA HEIGHTS, MN 55120

## New Mailing Address:

FEI Number: 41-1756542      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIPSHUTZ, MARTIN  
3922 COCONUT PALM DRIVE  
SUITE 210  
TAMPA, FL 33619 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: CEOD ( ) Delete  
Name: ALLEN, MICHAEL W  
Address: 1120 CENTRE POINTE DRIVE, SUITE 800  
City-St-Zip: MENDOTA HEIGHTS, MN 55120

Title: PTD ( ) Delete  
Name: LIPSHUTZ, MARTIN K  
Address: 1120 CENTRE POINTE DRIVE, SUITE 800  
City-St-Zip: MENDOTA HEIGHTS, MN 55120

Title: SD ( ) Delete  
Name: PALMA, MARK  
Address: 222 SO. 9TH ST, 3100 PIPER JAFFREY TOWER  
City-St-Zip: MINNEAPOLIS, MN 55402

Title: D ( ) Delete  
Name: KOENECKE, TED  
Address: 11000 VIKING DRIVE  
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: D ( ) Delete  
Name: SCHULZETENBERG, JOHN  
Address: 1200 EAST BIRCH  
City-St-Zip: BRANDON, SD 57005

Title: D ( ) Delete  
Name: KLINE, WILLIAM  
Address: 235 PENINSULA CIRCLE  
City-St-Zip: NEWNAN, GA 30263

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition  
Name: PALMA, MARK  
Address: 333 SO. 7TH ST, , SUITE 2000  
City-St-Zip: MINNEAPOLIS, MN 55402

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARTIN K. LIPSHUTZ

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04/23/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date