

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004554

FILED
Jan 14, 2005
Secretary of State

Entity Name: FIRST STATE MORTGAGE CORP. OF MINNESOTA

Current Principal Place of Business:

1400 CORPORATE CENTER CURVE
SUITE 150
EAGAN, MN 55121

New Principal Place of Business:

Current Mailing Address:

1400 CORPORATE CENTER CURVE
SUITE 150
EAGAN, MN 55121

New Mailing Address:

FEI Number: 41-1834316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRK, DALE
589 CORBEL DRIVE
NAPLES, FL 34110 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: PSD () Delete
Name: KUNKEL, DENNIS B
Address: 17724 LAYTON COURT
City-St-Zip: LAKEVILLE, MN 55054

Title: VPTD () Delete
Name: MILLER, SCOTT W
Address: 9056 163RD ST. W.
City-St-Zip: LAKEVILLE, MN 55044

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: KUNKEL, DENNIS B
Address: 17724 LAYTON COURT
City-St-Zip: LAKEVILLE, MN 55044

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 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: DENNIS KUNKEL

PSD

01/14/2005

Electronic Signature of Signing Officer or Director

Date