2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# F02000000294

Entity Name: T-CHEK SYSTEMS, INC.

Current Principal Place of Business:

8100 MITCHELL ROAD, SUITE 200
EDEN PRAIRIE, MN 55344

New Principal Place of Business:

14701 CHARLSON ROAD
1400
EDEN PRAIRIE, MN 55347

Current Mailing Address:

8100 MITCHELL ROAD, SUITE 200
EDEN PRAIRIE, MN 55344

New Mailing Address:

14701 CHARLSON ROAD
1400
EDEN PRAIRIE, MN 55347

FEI Number: 41-1958256 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:	PD	( ) Delete
Name:	WALKER, MARK	
Address:	10024 GRISTMILL RIDGE	
City-St-Zip:	EDEN PRAIRIE, MN 55344	
Title:	V	( ) Delete
Name:	GURLEY, JOE E	
Address:	116 SHILOH DRIVE	
City-St-Zip:	MARION, AR 72364	
Title:	V	( ) Delete
Name:	SINGH, J.J.	
Address:	8335 CARRIAGE HILL ALCOVE	
City-St-Zip:	SAVAGE, MN 55378	
Title:	VDS	( ) Delete
Name:	FEUSS, LINDA	
Address:	8100 MITCHELL ROAD	
City-St-Zip:	EDEN PRAIRIE, MN 55344	
Title:	AS	( ) Delete
Name:	SCHNEIDER, LORI M	
Address:	431 WATER STREET	
City-St-Zip:	JORDAN, MN 55352	
Title:	T	( ) Delete
Name:	RENNER, TROY	
Address:	2160 GALLERY COURT	
City-St-Zip:	VICTORIA, MN 55386	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	VDS	(X) Change ( ) Addition
Name:	FEUSS, LINDA	
Address:	14701 CHARLSON ROAD, SUITE 1400	
City-St-Zip:	EDEN PRAIRIE, MN 55347	
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 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: TROY RENNER T 04/11/2008

Electronic Signature of Signing Officer or Director — Date