## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000001541

Entity Name: SCIENCE MUSEUM OF MINNESOTA, INCORPORATED

FILED Mar 17, 2004 Secretary of State

| Current Principal Place of Business:   |   |                              | New Princi                                  | New Principal Place of Business:  |  |
|--|---|------------------------------|---|---|--|
| 120 WEST KELLOGG BLVD.<br>ST. PAUL, MN 55102   |   |                              |   |   |  |
| Current Mailing Address:   |   |                              | New Mailin                                  | New Mailing Address:  |  |
| 120 WEST KELLOGG BLVD.<br>ST. PAUL, MN 55102   |   |                              |   |   |  |
| FEI Number:  | 41-0706172  | FEI Number Applied For ( )   | I Number Not Applic                         | icable ( ) Certificate of Status Desired ( )  |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent:  |   |                              |   |   |  |
| C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US   |   |                              |   |   |  |
| 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  |   |                              |   |   |  |
| OFFICERS AND DIRECTORS:  |   |                              | ADDITIONS                                   | S/CHANGES TO OFFICERS AND DIRECTORS:  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | P ()[<br>PETERSON, JAN<br>120 WEST KELL<br>ST. PAUL, MN 5 | OGG BLVD.                    | Title:<br>Name:<br>Address:<br>City-St-Zip: | P (X) Change ( ) Addition<br>JOLLY, ERIC J DR.<br>120 WEST KELLOGG BLVD.<br>ST. PAUL, MN 55102              |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | V ()[<br>WILSON, KATHY<br>120 WEST KELL<br>ST. PAUL, MN 5 | OGG BLVD.                    | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | NELSON, VIVIAN  | LEGE - PO BOX 77             | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | THOME, KENNE  | MILLS BOULEVARD              | Title:<br>Name:<br>Address:<br>City-St-Zip: | T (X) Change ( ) Addition<br>KULLER, HART<br>SUITE 3500 225 SOUTH SIXTH STREET<br>MINNEAPOLIS, MN 55402     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | TUNHEIM, KATHI  | V TOWER, 8009-34TH AVE SOUTH | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:  | D ()[<br>GAROFALO, DOI<br>100 FOUTH AVEI<br>BAYPORT, MN 5 | NUE NORTH                    | Title:<br>Name:<br>Address:<br>City-St-Zip: | C (X) Change ( ) Addition<br>O'BRIEN, GARY T<br>730 SECOND AVENUE SOUTH SUITE 1350<br>MINNEAPOLIS, MN 55402 |  |

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC J. JOLLY P 03/17/2004