

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001145

FILED
Feb 27, 2006
Secretary of State

Entity Name: ARCHWAY MERCHANDISING SERVICES, INC.

Current Principal Place of Business:

19850 SOUTH DIAMOND LAKE RD.
ROGERS, MN 553744572

New Principal Place of Business:

20000 SOUTH DIAMOND LAKE RD.
ROGERS, MN 553744572

Current Mailing Address:

19850 SOUTH DIAMOND LAKE RD.
ROGERS, MN 553744572

New Mailing Address:

20000 SOUTH DIAMOND LAKE RD.
ROGERS, MN 553744572

FEI Number: 37-1453968

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: VD (X) Delete
Name: PERFALL, CLAY
Address: 19850 SOUTH DIAMOND LAKE ROAD
City-St-Zip: ROGERS, MN 55374

Title: P () Delete
Name: FRUCHTENBAUM, ED
Address: 19850 SOUTH DIAMOND LAKE RD.
City-St-Zip: ROGERS, MN 553744572

Title: ST () Delete
Name: LUNDBERG, DENEENE
Address: 19850 SOUTH DIAMOND LAKE RD.
City-St-Zip: ROGERS, MN 553744572

Title: V (X) Delete
Name: BURKE, BRIAN H
Address: 19850 SOUTH DIAMOND LAKE ROAD
City-St-Zip: ROGERS, MN 55374

Title: V (X) Delete
Name: FLETCHALL, MATTHEW C
Address: 19850 SOUTH DIAMOND LAKE ROAD
City-St-Zip: ROGERS, MN 55374

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: FRUCHTENBAUM, ED
Address: 20000 SOUTH DIAMOND LAKE RD.
City-St-Zip: ROGERS, MN 553744572

Title: ST (X) Change () Addition
Name: LUNDBERG, DENEENE
Address: 20000 SOUTH DIAMOND LAKE RD.
City-St-Zip: ROGERS, MN 553744572

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: PATRICK EDENS

SSA

02/27/2006

Electronic Signature of Signing Officer or Director

Date