

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002418

Entity Name: NORTHMARQ CAPITAL, INC.

FILED
Mar 30, 2006
Secretary of State

Current Principal Place of Business:

3500 AMERICAN BVLD W, STE. 500
BLOOMINGTON, MN 55431

New Principal Place of Business:

Current Mailing Address:

60 SOUTH SIXTH STREET, STE. 3800
MINNEAPOLIS, MN 55402

New Mailing Address:

FEI Number: 41-1492937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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: D () Delete
Name: COLIANNI, ALBERT J JR
Address: 60 SOUTH SIXTH STREET
City-St-Zip: MINNEAPOLIS, MN 55402

Title: D () Delete
Name: DORAN, THOMAS G
Address: 701-4TH AVENUE SOUTH, STE. 500
City-St-Zip: MINNEAPOLIS, MN 55402

Title: D () Delete
Name: D'ALESSIO, M. WALTER
Address: 1735 MARKET STREET, 12TH FLOOR
City-St-Zip: PHILADELPHIA, PA 19103

Title: D () Delete
Name: WILCOX, JANICE OZZELLO
Address: 60 SOUTH SIXTH STREET, STE. 3800
City-St-Zip: MINNEAPOLIS, MN 554801000

Title: D () Delete
Name: PADILLA, EDWARD
Address: 3500 AMERICAN BVLD W, STE. 500
City-St-Zip: BLOOMINGTON, MN 554314435

Title: D () Delete
Name: STOFER, BOYD B
Address: 3500 AMERICAN BVLD W, STE. 500
City-St-Zip: BLOOMINGTON, MN 554314435

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: S (X) Change () Addition
Name: VINCHATTLE, LINDA A
Address: 60 SOUTH SIXTH STREET, STE. 3800
City-St-Zip: MINNEAPOLIS, MN 55402

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: LINDA A. VINCHATTLE

SECR

03/30/2006

Electronic Signature of Signing Officer or Director

Date