

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F05000002595

**FILED**  
**Sep 18, 2012**  
**Secretary of State**

**Entity Name:** MAGNOLIA HI-FI, INC.

**Current Principal Place of Business:**

7601 PENN AVENUE S.  
RICHFIELD, MN 55423 US

**New Principal Place of Business:**

**Current Mailing Address:**

7601 PENN AVENUE S.  
RICHFIELD, MN 55423 US

**New Mailing Address:**

**FEI Number:** 91-0857815

**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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VITELLI, MICHAEL A.  
Address: 7601 PENN AVENUE S.  
City-St-Zip: RICHFIELD, MN 55423 US

Title: AS  
Name: HARTMAN, TODD  
Address: 7601 PENN AVENUE S.  
City-St-Zip: RICHFIELD, MN 55423 US

Title: T  
Name: GOULD, CHRISTOPHER K  
Address: 7601 PENN AVENUE S.  
City-St-Zip: RICHFIELD, MN 55423 US

Title: VP  
Name: CARLSON, KRISTI  
Address: 7601 PENN AVENUE S.  
City-St-Zip: RICHFIELD, MN 55423 US

I hereby 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 all other like empowered.

SIGNATURE: MANDY HENDRICKS

POA

09/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date