


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90230 040 ***150.00

DOCUMENT # F0500007498

1. Entity Name
GENMAR TRANSPORTATION, INC.



Principal Place of Business 2900 IDS CENTER, 80 SOUTH 8TH STREET MINNEAPOLIS, MN 55402	Mailing Address 2900 IDS CENTER, 80 SOUTH 8TH STREET MINNEAPOLIS, MN 55402
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04172006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 41-2013073	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPS CLOUTIER, ROGER R II 2900 IDS CENTER, 80 SOUTH 8TH STREET MINNEAPOLIS, MN 55402
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV VIGDAL, DAVID H 2900 IDS CENTER, 80 SOUTH 8TH STREET MINNEAPOLIS, MN 55402
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HULS, DAVID J 2900 IDS CENTER, 80 SOUTH 8TH STREET MINNEAPOLIS, MN 55402
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MELBY, JEFFREY E 2900 IDS CENTER, 80 SOUTH 8TH STREET MINNEAPOLIS, MN 55402
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *David H. Vigdal* *Vice President* 4-25-06 612.339.7600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #