2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007
Secretary of State

DOCUMENT# F06000001282

Entity Name: LOWRY HILL INVESTMENT ADVISORS, INC.

Current Principal Place of Business:

90 S 7TH STREET, SUITE 5300
WELLS FARGO CENTER
MINNEAPOLIS, MN 55402

New Principal Place of Business:

Current Mailing Address:

90 S 7TH STREET, MAC#N9305-173
MINNEAPOLIS, MN 55479

New Mailing Address:

90 S 7TH STREET
MAC# N9305-173
MINNEAPOLIS, MN 55479

FEI Number: 41-1558233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: C ( ) Delete
Name: CAMPBELL, JON R
Address: 90 S 7TH STREET
City-St-Zip: MINNEAPOLIS, MN 55479

Title: DPT ( ) Delete
Name: STEINER, JAMES P
Address: 90 S 7TH STREET
City-St-Zip: MINNEAPOLIS, MN 55479

Title: VP ( ) Delete
Name: HULL, THOMAS S
Address: 90 S 7TH STREET
City-St-Zip: MINNEAPOLIS, MN 55479

Title: S ( ) Delete
Name: KRIEGER, JULIE L
Address: 90 S 7TH STREET
City-St-Zip: MINNEAPOLIS, MN 55479

Title: CTO ( ) Delete
Name: ANDERSON, JASON C
Address: 90 S 7TH STREET 53RD FLOOR
City-St-Zip: MINNEAPOLIS, MN 554023903

Title: CCOS ( ) Delete
Name: HOLMAN, ERIC S
Address: 90 S 7TH STREET 53RD FLOOR
City-St-Zip: MINNEAPOLIS, MN 554023903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CH (X) Change ( ) Addition
Name: CAMPBELL, JON R
Address: 90 S 7TH STREET
City-St-Zip: MINNEAPOLIS, MN 55479

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: ( ) 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: ERIC S HOLMAN CCOS 04/18/2007

Electronic Signature of Signing Officer or Director Date