

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004400

FILED  
May 01, 2007  
Secretary of State

Entity Name: VISTA MORTGAGE OF MN INCORPORATED

## Current Principal Place of Business:

217 N 2ND STREET  
STILLWATER, MN 55082

## New Principal Place of Business:

6120 OREN AVENUE N  
STILLWATER, MN 55082

## Current Mailing Address:

217 N 2ND STREET  
STILLWATER, MN 55082

## New Mailing Address:

6120 OREN AVENUE N  
STILLWATER, MN 55082

FEI Number: 41-2017180

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.  
773 4TH AVENUE, SUITE 3  
NAPLES, FL 34102 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCP ( ) Delete  
Name: NORLING, KIM DAVID  
Address: 300 OAK KNOLL DRIVE  
City-St-Zip: MARINE ON ST. CROIX, MN 55047

Title: VCDS ( ) Delete  
Name: MONTGOMERY, PATRICIA  
Address: 300 OAK KNOLL DRIVE  
City-St-Zip: MARINE ON ST. CROIX, MN 55047

Title: VP (X) Delete  
Name: GOETSCH, BRUCE  
Address: 3982 KINDRED WAY  
City-St-Zip: LAKE ELMO, MN 55042

## 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:

I hereby certify that the information supplied with this filing does not qualify 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: KIM DAVID NORLING

DCP

05/01/2007

Electronic Signature of Signing Officer or Director

Date