2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007790

Entity Name: JAMES M. GROBE, INC.

Address:

City-St-Zip:

40 W. 87TH ST., 3RD FLOOR

NEW YORK, NY 10019

FILED Jan 07, 2008 Secretary of State

_many man		W. ORCOBE, IIVO.					
Current Principal Place of Business:				New Principal Place of Business:			
7900 XERXES AVE. SOUTH, SUITE 1300 BLOOMINGTON, MN 55431				7900 XERXES AVE. SOUTH, SUITE 1300 STE 1300 BLOOMINGTON, MN 55431			
Current Mailing Address:				New Mailing Address:			
7900 XERXES AVE. SOUTH, SUITE 1300 BLOOMINGTON, MN 55431				5804 LONG BRAKE TRAIL EDINA, MN 55439			
FEI Number:	41-1430995	FEI Number Applied For ()) FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired	1()
Name and	Current Registered Agen	Name and Address of New Registered Agent:					
N. PALM E	SHORE DR., \$ SCH, FL 3340 named entity	8 US	the purpose o	f changing i	ts register	ed office or registered agent, c	or both,
in the State	of Florida.				_	-	
SIGNATUR							
		nic Signature of Registered	I Agent			Date	
Election Car	npaign Financir	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	GROBE, JAME	AVE. SOUTH, SUITE 1300		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DV (GROBE, MAR` 7550 FRANCE BLOOMINGTO	AVE. SOUTH		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	DS (GROBE, MICH) Delete AEL		Title: Name:	DS GROBE. N	(X) Change()Addition	

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.

Address:

City-St-Zip:

40 W. 87TH ST., 32 ND FLOOR

NEW YORK, NY 10019

SIGNATURE: JAMES M. GROBE PC 01/07/2008