

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007790

Entity Name: JAMES M. GROBE, INC.

FILED
Jan 11, 2009
Secretary of State

Current Principal Place of Business:

7900 XERXES AVE. SOUTH, SUITE 1300
STE 1300
BLOOMINGTON, MN 55431

New Principal Place of Business:

5804 LONG BRAKE TRAIL
EDINA, MN 55439

Current Mailing Address:

5804 LONG BRAKE TRAIL
EDINA, MN 55439

New Mailing Address:

FEI Number: 41-1430995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROBE, JAMES
108 LAKESHORE DR., SUITE 1840
N. PALM BCH, FL 33408 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: PC () Delete
Name: GROBE, JAMES M
Address: 7900 XERXES AVE. SOUTH, SUITE 1300
City-St-Zip: BLOOMINGTON, MN 55431

Title: DV () Delete
Name: GROBE, MARYANNE
Address: 7550 FRANCE AVE. SOUTH
City-St-Zip: BLOOMINGTON, MN 55431

Title: DS () Delete
Name: GROBE, MICHAEL
Address: 40 W. 87TH ST., 32 ND FLOOR
City-St-Zip: NEW YORK, NY 10019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: GROBE, JAMES M
Address: 5804 LONG BRAKE TRAIL
City-St-Zip: EDINA, MN 55439

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: GROBE, MICHAEL
Address: 244 JACKSON STREET
City-St-Zip: SAN FRANCISCO, CA 94111

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: JAMES M. GROBE

PRES

01/11/2009

Electronic Signature of Signing Officer or Director

Date