

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004229

FILED
Apr 14, 2009
Secretary of State

Entity Name: POLAR INVESTMENT COUNSEL, INC.

Current Principal Place of Business:

19547 210TH AVE NE
THIEF RIVER FALLS, MN 567018354

New Principal Place of Business:

Current Mailing Address:

28798 CRAMER CT
BURLINGTON, WI 531059427

New Mailing Address:

28798 CRAMER CT
BURLINGTON, WI 531059427 US

FEI Number: 39-1823062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: JORDAN, MICHAEL C
Address: 19547 210TH AVE NE
City-St-Zip: THIEF RIVER FALLS, MN 567018354

Title: VST () Delete
Name: CRAMER, JOANNE L
Address: 28798 CRAMER CT
City-St-Zip: BURLINGTON, WI 531059427

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOANNE L CRAMER

VST

04/14/2009

Electronic Signature of Signing Officer or Director

Date