

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000000617 (0)

1. Corporation Name

CARLSON TRAVEL NETWORK ASSOCIATES, INC.

Principal Place of Business

12755 STATE HIGHWAY 55
MINNEAPOLIS MN 55441

Mailing Address

ATTN: TAX DEPT
P.O. BOX 59159
MINNEAPOLIS MN 55441
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified

02/08/1994

4. FEI Number

95-3939786

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	C CARLSON, CURTIS L	1.2 NAME	
STREET ADDRESS	12755 STATE HIGHWAY 55	1.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN 55441	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P BATT, MICHAEL	2.2 NAME	
STREET ADDRESS	12755 STATE HWY 55	2.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VPCF DIGNAN, JOHN M	3.2 NAME	
STREET ADDRESS	12755 STATE HWY. 55	3.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V BEARMON, LEE	4.2 NAME	
STREET ADDRESS	12755 STATE HIGHWAY 55	4.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN 55441	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V HAMANN, D.M.	5.2 NAME	
STREET ADDRESS	12755 STATE HIGHWAY 55	5.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN 55441	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S HOGAN, GERALD W	6.2 NAME	
STREET ADDRESS	12755 STATE HIGHWAY 55	6.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN 55441	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

D. M. Hamann

4/6/98 162/540-5883

CR2E034 (10/97)

Carlson Travel Network Associates, Inc.
F.E.I.N.: 95-3939786

<u>Office</u>	<u>Name</u>	<u>Address</u>
Chairman of the Board	Curtis L. Carlson	12755 State Hwy 55, Minneapolis MN 55441
Vice Chair of the Board	Marilyn C. Nelson	12755 State Hwy 55, Minneapolis MN 55441
President	Michael Batt	12755 State Hwy 55, Minneapolis MN 55441
Vice President - Legal	Lee Bearmon	12755 State Hwy 55, Minneapolis MN 55441
Vice President - Tax	Darrel M. Hamann	12755 State Hwy 55, Minneapolis MN 55441
Vice President-Finance and Administration/CFO	John M. Dignan	12755 State Hwy 55, Minneapolis MN 55441
Vice President	Pamela J. Myhr	12755 State Hwy 55, Minneapolis MN 55441
Vice President- Sales & Marketing	Roger Block	12755 State Hwy 55, Minneapolis MN 55441
Controller	Brian Brommel	12755 State Hwy 55, Minneapolis MN 55441
Secretary	Gerald Hogan	12755 State Hwy 55, Minneapolis MN 55441
Assistant Secretary	Dan E. Lee	12755 State Hwy 55, Minneapolis MN 55441
Director	Curtis L. Carlson	12755 State Hwy 55, Minneapolis MN 55441
Director	Marilyn C. Nelson	12755 State Hwy 55, Minneapolis MN 55441
Director	Lee Bearmon	12755 State Hwy 55, Minneapolis MN 55441

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November 1997 LISTING