

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000000617

1. Entity Name

CARLSON TRAVEL NETWORK ASSOCIATES, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90030 034 ***150.00

Principal Place of Business

Mailing Address

12755 STATE HIGHWAY 55
 MINNEAPOLIS MN 55441

ATTN: TAX DEPT
 P.O. BOX 59159
 MINNEAPOLIS MN 55459-8200
 US

2. Principal Place of Business

3. Mailing Address

1405 Xenium Lane No.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Minneapolis MN

City & State

4. FEI Number 95-3939786

Applied For
 Not Applicable

Zip
 55441

Country
 USA

Zip
 55459-8250

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 CCD NELSON, MARILYN C
 12755 STATE HIGHWAY 55
 MINNEAPOLIS MN 55441 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 1405 Xenium Lane No. ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 P BATT, MICHAEL
 12755 STATE HWY 55
 MINNEAPOLIS MN ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 1405 Xenium Lane No. ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VPCF DIGNAN, JOHN M
 12755 STATE HWY. 55
 MINNEAPOLIS MN ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Controller Brian Brommel
 1405 Xenium Lane No.
 Minneapolis MN 55441 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V BEARMON, LEE
 12755 STATE HIGHWAY 55
 MINNEAPOLIS MN 55441 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 Sr. VP & General Counsel William A. Van Brunt
 1405 Xenium Lane No.
 Minneapolis MN 55441 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 V HAMANN, D.M.
 12755 STATE HIGHWAY 55
 MINNEAPOLIS MN 55441 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 1405 Xenium Lane No. ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 S HOGAN, GERALD W
 12755 STATE HIGHWAY 55
 MINNEAPOLIS MN 55441 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 1405 Xenium Lane No. ☒ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

D.M. Hamann
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harrel M. Hamann, VP Tax 4-2400 763-212-2920

Date

Daytime Phone #

CR2E034 (9/99)