

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002561

Entity Name: FOSS NORTH AMERICA, INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

8091 WALLACE ROAD
EDEN PRAIRIE, MN 55344 US

New Principal Place of Business:

Current Mailing Address:

8091 WALLACE ROAD
EDEN PRAIRIE, MN 55344 US

New Mailing Address:

FEI Number: 41-1529328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
SUITE 105
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: ST () Delete
Name: ISAACSON, JEFFREY
Address: 8091 WALLACE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: VC () Delete
Name: FOSS, PETER
Address: 69 SLANGERPUGADE DK 3400
City-St-Zip: HILLERNED DENMARK,

Title: P () Delete
Name: SUENSGAARD, CHRISTIAN
Address: 8091 WALLACE ROAD
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: COB () Delete
Name: ELGAARD, JAN
Address: 69 SLANGERUPGEIDE
City-St-Zip: HILLEROD, DENMARK, DK3400

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JEFFREY ISAACSON

ST

02/19/2009

Electronic Signature of Signing Officer or Director

Date