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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400003558 (3)

HARMON GLASS COMPANY

Principal Place of Business Mailing Address 4000 OLSON MEMORIAL HIGHWAY 4000 OLSON MEMORIAL HIGHWAY SUITE 600 SUITE 600 DO NOT WRITE IN THIS SPACE MINNEAPOLIS MN 55422-5334 MINNEAPOLIS MN 55422-5334 3. Date incorporated or Qualified 07/07/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 41-0683646 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE Robert V. Baumgartner ANDERSON, LARRY C NAME 1.2 NAME 1000 Olson Memorial Hwy Ste. 600 4000 OLSON MEMORIAL HWY. #600 1.3 STREET ADDRESS STREET ADDRESS minneapolis, MN 55422 MINNEAPOLIS MN 55422 14 CITY-ST-ZIP CITY-ST-ZIP Change Addition Oswald 5. Wyatt III. DELETE 2.1 TITLE TITLE JACOBSON, GARY LEE 4000 Olson memorial they ste 600 22 NAME NAME 4000 OLSON MEMORIAL HWY. #600 2.3 STREET ADDRESS STREET ADDRESS MN 55422 MINNEAPOLIS MN 55422 2. 4 CITY-ST-ZIP CITY-ST-ZIP ___ Addition DELETE Change TITLE 3.1 TITLE PEARSON, RICHARD JOHN NAME 3.2 NAME 4000 OLSON MEMORIAL HWY. #600 3.3 STREET ADDRESS STREET ADDRESS **MINNEAPOLIS MN 55422** CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE DESUTTER, DAVID F 4. 2 NAME NAME 4000 OSLON MEMORIAL HWY. #600 STREET ADDRESS 4.3 STREET ADDRESS MINNEAPOLIS MN 55422 CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change 5.1 TITLE MARY A. HAUFF 5.2 NAME

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY - ST-ZIP

61 TITLE

6.2 NAME

DELETE

7900 XERXES AVE, S.

TOMUNSON, PERCY C JR.

4000 OLSON MEMORIAL HWY, #600

BLOOMINGTON MN

MINNEAPLOIS MN

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Varance 11 Box (May 17 MM)

Change

Addition

FILED

Feb 23 1998 8:00am

Secretary of State