FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000005509 (4)**

1. Corporation Name
BNC ACQUISITION CORP.

Principal Place of Business
4700 NATHAN LANE
PO BOX 46106
PLYMOUTH MN 55442

Mailing Address
4700 NATHAN LANE
PO BOX 46106
PLYMOUTH MN 55442

3. Date Incorporated or Qualified: 10/24/1994
3a. Date of Last Report: 04/19/1995

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 41-1651180 — 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET, SUITE 105
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 — DATE

12. OFFICERS AND DIRECTORS

TITLE	COBP	☐ DELETE
NAME	DEGEORGE, PETER R	
STREET ADDRESS	210 WIESE ROAD	
CITY-ST-ZIP	CHESHIRE CT 06410	
TITLE	COB	☒ DELETE
NAME	DEGEORGE, PETER R	
STREET ADDRESS	210 WIESE ROAD	
CITY-ST-ZIP	CHESHIRE CT 06410	
TITLE	VCV	☐ DELETE
NAME	GETZLER, HERBERT L	
STREET ADDRESS	91 VISTA TERRACE	
CITY-ST-ZIP	CHESHIRE CT 06410	
TITLE	V	☐ DELETE
NAME	DODGE, JONATHAN K	
STREET ADDRESS	100 WEST 89TH ST. APT. 2B	
CITY-ST-ZIP	NEW YORK NY 10024	
TITLE	S	☐ DELETE
NAME	HARTMAN, MORRIS J	
STREET ADDRESS	5234 GIRARD AVENUE SOUTH	
CITY-ST-ZIP	MINNEAPOLIS MN 55419	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☒ Change ☐ Addition
12 NAME		
13 STREET ADDRESS	3208 Pilots Point Circle	
14 CITY-ST-ZIP	Jupiter, FL 33477	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☒ Change ☐ Addition
32 NAME		
33 STREET ADDRESS	2702 Captains Way	
34 CITY-ST-ZIP	Jupiter, FL 33477	
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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: M J Hartman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Morris J. Hartman 2/12/96 (612)553-8348
Date — Daytime Phone #

CR2E034 (12/95)