FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sancra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

F95000001494 (2)

FBS INFORMATION SERVICES CORPORATION

601 SECOND AVENUE SOUTH

Principal Place of Business

Mailing Address

601 SECOND AVENUE SOUTH MINNEAPOURS MN 55402



MINNEAPOL	.15 MN 55402	MINNEAPOLIS MN 554	MINNEAPOLIS MN 55402			
					3. Date Incorporated or Qualified 03/28/1995	3a. Date of Last Report
 	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		- -	41-0880291	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			6. Election Campaign Financing	55.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Ζιρ	Country	,	8. This corporation has liability for in	ntangible tax under s 199.032,
24	[25]	[29]	30		Florida Statutes	XX No
	9. Name and Address of Current	Registered Agent		T	10. Name and Address of New R	egistered Agent
0.7.00	DDOOLTIAL AVATELA		81	Name		
C T CORPORATION SYSTEM				Street Addre	ess (P.O. Box Number is Not Acceptable	O'
1200 SOUTH PINE ISLAND ROAD						
PLANIA	ATION FL 33324		83			
			84	City		85 Zip Code
11. Pursuant t	to the provisions of Sections 607,0502 a	nd 607.1508, Florida Statute	s, the above r	l named comora	ation submits this statement for the purr	OSA of changing its registered off on
	ed agent, or both, in the State of Florida th, and accept the obligations of, Section			oration's board	d of directors. I hereby accept the appo	intment as registered agent. I am
SIGNATURE						
12.	Signal de types en printed hans of registern eject an OFFICERS AND		E Hogister o Ayer ■ 13.	il Sejentare regiones		DATE
TITLE	CD	T DELETE	1 1 TIFLE	т	ADD/HONS/CHANGES TO OFFIC	
NAME	HEASLEY, PHILIP G		1.2 NAME	S		Change Addition
STREET ADDRESS	601 SECOND AVENUE SOUTH	4		Ch	osy, James L.	_
CITY-SI-ZIP	MINNEAPOLIS MN	•	1.3 STHEET		l Second Avenue Sout	
TITLE	P	☐ DELETE	2 1 Tirus		nneapolis, MN 55402	
NAME	SANDVIK, TERRENCE P		2 2 NAME	V	hoen, Alan L.	Change XX Addition
STREET ADDRESS	1200 ENERGY PARK DRIVE		2 3 STREET		200 Energy Park Drive	
City-St-Zip	ST PAUL MN		2 4 City S		. Paul, MN 55108	;
THILE	Ť	DELETE	3 1 TITLE		1 1 au 1 3 3 1 0 0	☐ Change ★★ Addition
NAME	PARRIN, DAVID J		3.2 NAME	V	lander A T	Change XX Addition
STREET ADDRESS	601 SECOND AVENUE SOUTH	ŀ	3 3 SIREET		hmitt, Ann L. O 17th Street	
CITY-ST-ZIP	Minneapolis Mn		3 4 CITY - S		nver, CO 80202	
TITLE	AS	☐ DELETE	4 1 TILE	DE	11VEI: CO 00202	Change Addition
NAME	STOCKMAN, MARY J		4.2 NAME	İ		
STREET ADDRESS	601 SECOND AVENUE SOUTH	1	4 3 STREET	ADDRESS		
C:TY+ST-Z:P	MINNEAPOLIS MN		4.4 CITY - SI	! 2IP		
THTLE	AS	DELETE	5 1 TIPLE			Change Addition
NAME	BRADY, MARYBETH		5.2 NAME			
STREET ADDRESS	601 SECOND AVENUE SOUTH	1	53STREET	ADDRESS		
CITY - ST - ZIP	MINNEAPOLIS MN	***	5.4 C(TY-\$1	- 2iP		
TITLE	ν	☐ DELETE	€ 1 T:TLE			Change Addition
NAME	BUSSELMAIER, JOHN L		6.2 NAME			
STREET ADDRESS	918 17TH STREET		6.3 STREET /	ADORESS		
City-St-ZiP	DENVER CO		6.4 CITY - S1	ZIF		
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4. 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)(k). Fiorida 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 effector of the corporation of the corpora

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNATURE OF DIRECTOR

James L. Chosy, Secretary

4-9-96

612-973-0359
