## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F95000003040 Apr 21, 2000 8:00 am Secretary of State 1. Entity Name GAME FINANCIAL CORPORATION 04-21-2000 90135 036 \*\*\*150.00 Principal Place of Business Mailing Address 13705 FIRST AVE NO 13705 FIRST AVE N MINNEAPOLIS MN 55441-5444 MINNEAPOLIS MN 55441 2. Principal Place of Business 3. Mailing Address 850 N CENTRAL AVE Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 41-1684452 Not Applicable Country 2/5A Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PRESIDENT - DIRECTOR **PDST** Addition Delete TITLE ANDREW A. SHERWIN 13 705- INTAVE So DACHIS, GARY A NAME 12111 GOLDEN ACRE DR STREET ADDRESS STREET ADDRESS STLOUIS PARK MN 55441 CITY-ST-ZIP MINNETONKA MN 55305 CITY-ST-7IP Delete CFO Change ☐ Addition TITLE TITLE DACHIS, GARY A NAME NAME STREET ADDRESS 12111 GOLDEN ACRE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MINNETONKA MN 55305 ☐ Delete Change ☐ Addition TITLE TITLE Chief Financial Officer RINGER. JEFFREY NAME NAME Jeffrey L. Ringer STREET ADDRESS 2711 Bent Tree Circle Minnetonka, MN 55305 STREET ADDRESS 2538 HAVERTON CIRCLE CiTY-ST-7IP CITY-ST-ZIP MENDOTH HEIGHTS MN Change ☐ Addition TITLE ☐ Delete TITLE VP of Operations FREDERICHS-MOOSE, DEANNA NAME Deanna L. Frederichs-Moose NAME 7352 BLAIRWAY STREET ADDRESS STREET ADDRESS 3750 Evergreen Lane North CITY-ST-ZIP CITY-ST-7IP WAHKON MN 56386 Plymouth, MN 55441 Addition Change ☐ Delete TITLE SECRETARY SAYEE, SCOTTE NAME NAME 1850 N CENTRAL AVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PHOENK AZ ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 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 the receiver of the true amount of the 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:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)