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FILED
Feb 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000004531 (8)**

1. Corporation Name

SUNRISE LEASING OF MINNESOTA CORPORATION

Principal Place of Business

**5500 WAYZATA BLVD., STE. 725
GOLDEN VALLEY MN 55416**

Mailing Address

**5500 WAYZATA BLVD., STE. 725
GOLDEN VALLEY MN 55416**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/19/1995	
21		26		4. FEI Number 41-1805636	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		Trust Fund Contribution <input type="checkbox"/>	
23		28		8. This corporation owes or has paid the current year Intangible	
Zip	Country	Zip	Country	Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	25	29	30		

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
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	President, Director
NAME	CARLSTROM, ERROL	1.2 NAME	
STREET ADDRESS	5500 WAYZATA BLVD, STE 725	1.3 STREET ADDRESS	
CITY-ST-ZIP	GOLDEN VALLEY MN	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	BRATTAIN, DONALD R	2.2 NAME	
STREET ADDRESS	601 LAKESHORE PARK, #1140	2.3 STREET ADDRESS	
CITY-ST-ZIP	MINNEAPOLIS MN	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	
NAME	PIKE, BRAD	3.2 NAME	
STREET ADDRESS	5500 WAYZATA BLVD, STE 725	3.3 STREET ADDRESS	
CITY-ST-ZIP	GOLDEN VALLEY MN	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	Director
NAME	PRESCOTT, DANA	4.2 NAME	Thomas King
STREET ADDRESS	5500 WAYZATA BLVD, STE 725	4.3 STREET ADDRESS	5500 Wayzata Blvd. Suite 725
CITY-ST-ZIP	GOLDEN VALLEY MN	4.4 CITY-ST-ZIP	Golden Valley, MN 55416
TITLE	CFO	5.1 TITLE	
NAME	SCHWACH, BARRY	5.2 NAME	
STREET ADDRESS	5500 WAYZATA BLVD SUITE 725	5.3 STREET ADDRESS	
CITY-ST-ZIP	GOLDEN VALLEY MN	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	Secretary
NAME		6.2 NAME	Jeffrey G. Jacobsen
STREET ADDRESS		6.3 STREET ADDRESS	5500 Wayzata Blvd., Suite 725
CITY-ST-ZIP		6.4 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, in my appointment with an address.

SIGNATURE:

Secretary

1/10/98 (612) 593-1904

CR2E034 (10/97)