

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90106 023 ***150.00

DOCUMENT # F95000004531

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

3. Date Incorporated or Qualified

09/19/1995

4. FEI Number

41-1805636

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 owes the current year Intangible

Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE
NAME CARLSTROM, ERROL
STREET ADDRESS 5500 WAYZATA BLVD, STE 725
CITY-ST-ZIP GOLDEN VALLEY MN

TITLE D ☐ DELETE
NAME BRATTAIN, DONALD R
STREET ADDRESS 601 LAKESHORE PARK, #1140
CITY-ST-ZIP MINNEAPOLIS MN

TITLE V ☒ DELETE
NAME PIKE, BRAD
STREET ADDRESS 5500 WAYZATA BLVD, STE 725
CITY-ST-ZIP GOLDEN VALLEY MN

TITLE D ☐ DELETE
NAME KING, THOMAS
STREET ADDRESS 5500 WAYZATA BLVD SUITE 725
CITY-ST-ZIP GOLDEN VALLEY MN 55416

TITLE S ☐ DELETE
NAME JACOBSEN, JEFFREY G
STREET ADDRESS 5500 WAYZATA BLVD SUITE 725
CITY-ST-ZIP GOLDEN VALLEY MN 55416

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President, Director ☐ Change ☒ Addition
1.2 NAME Peter King
1.3 STREET ADDRESS 5500 Wayzata Blvd., Suite 725
1.4 CITY-ST-ZIP Golden Valley, MN 55416-1244

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Vice President, Director ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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, or in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/99

Date

612 593 1904

Daytime Phone #

CR2E034 (11/98)