2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F95000005904

1. Entity Name

MINNESOTA BBC PROPERTY CO.



Principal Place of Business

7601 PENN AVE S

TAX DEPT

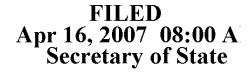
MINNEAPOLIS, MN 55423

Mailing Address

P.O. BOX 9312

TAX DEPT

MINNEAPOLIS, MN 55440





DO NOT WRITE IN THIS SPACE

04062007 No Chg-P CR2E034 (11/05)

4. FEI Number 41-1788391 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.-Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE_							
5.0.0.0.0.0.0.0	Signature, typed or printed name of registered agent and title it	applicable (NOTE, Regi	istered Agent signature	gnature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	U00000706587 04/24/07-80041-013	150 . 00	
10.	OFFICERS AND DIRECTORS						
TITLE	DCEO						
NAME	SCHULZE, RICHARD M			•	•	•	
STREET ADDRESS	5015 NOB HILL DRIVE		1				
CITY-ST-ZIP	EDINA, MN 55435			4		•	
TITLE	DP			,			
NAME	ANDERSON, BRADBURY H	•		•	a sept to the sept	÷	
STREET ADDRESS	1874 SUMMIT AVE.						
City-St-Z#P	ST. PAUL, MN 55101						
TITLE	DV						
NAME	LENZMEIER, ALLEN U						
STREET ADDRESS	322 MISSISSIPPI RIVER BLVD. N.			DO NOT WRITE			
CITY-ST-ZIP	ST. PAUL, MN 551044927			IN THIS SPACE			
TITLE	VT		•				
NAME	JACKSON, DARREN			114			
STREET ADDRESS	290 WOODLAWN AVENUE		1	٠.			
CITY-ST-ZIP	SAINT PAUL, MN 551051237		1			, ·	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

VS

TILTON, G. MICHAEL

RAHFIELD, MN 55423

7601 PENN AVE. S.

JOYCE, JOSEPH M

13115 - 37TH AVE. N. PLYMOUTH, MN 55441

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Titton

607 612-291-491