

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2001 8:00 am
Secretary of State

05-29-2001 90007 045 ***150.00

DOCUMENT # F95000005990

1. Entity Name

CUNNINGHAM, HAMILTON, QUITER, P.A.

Principal Place of Business

Mailing Address

201 MAIN ST SE
 MINNEAPOLIS MN 55414

201 MAIN ST SE
 MINNEAPOLIS MN 55414-2139

660656



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 325

Suite 325

City & State

City & State

4. FEI Number 41-1456525

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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

(NOT)

Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
 NAME CUNNINGHAM, JOHN W
 STREET ADDRESS 201 MAIN ST SE
 CITY-ST-ZIP MINNEAPOLIS MN 55414

TITLE D/CEO ☒ Change ☐ Addition
 NAME Cuningham, John W
 STREET ADDRESS 201 Main Street SE, Suite 325
 CITY-ST-ZIP Minneapolis, MN 55414

TITLE DSV ☐ Delete
 NAME HAMILTON, JOHN E
 STREET ADDRESS 201 MAIN ST SE
 CITY-ST-ZIP MINNEAPOLIS MN 55414

TITLE D ☐ Change ☒ Addition
 NAME Scheidel, James
 STREET ADDRESS 4056 Del Rey Avenue
 CITY-ST-ZIP Marina Del Rey, CA 90292

TITLE DP ☐ Delete
 NAME QUITER, JOHN E
 STREET ADDRESS 4056 DEL REY AVE
 CITY-ST-ZIP MARINA DEL REY CA 90292

TITLE DPT ☒ Change ☐ Addition
 NAME Quiter, John E
 STREET ADDRESS 4056 Del Rey Avenue
 CITY-ST-ZIP Marina Del Rey, CA 90292

TITLE VD ☐ Delete
 NAME HOSKENS, THOMAS L
 STREET ADDRESS 201 MAIN ST SE
 CITY-ST-ZIP MINNEAPOLIS MN 55414

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VD ☐ Delete
 NAME SOLBERG, RICHARD C
 STREET ADDRESS 4056 DEL REY AVENUE
 CITY-ST-ZIP MARIA DEL RAY CA 90292

TITLE VD ☒ Change ☐ Addition
 NAME Solberg, Richard C
 STREET ADDRESS 3040 N 44th Street
 CITY-ST-ZIP Phoenix, AZ 85018

TITLE VD ☐ Delete
 NAME LOWE, DOUGLAS A
 STREET ADDRESS 4056 DEL REY AVENUE
 CITY-ST-ZIP MARIA DEL RAY CA 90292

TITLE ☐ Change ☐ Addition
 NAME
 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 trustee empowered to 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John Hamilton 4/2/01 612-379-3400

CR2E034 (9/99)