2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001805

Entity Name: RTW, INC.

FILED Feb 07, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
8500 NORMANDALE LAKE BOULEVARD						
SUITE 1400 MINNEAPO	0 DLIS, MN 5543'	7 US				
Current Mailing Address:				New Mailing Address:		
8500 NORI	MANDALE LAK	E BOULEVARD				
SUITE 1400 MINNEAPOLIS, MN 55437 US						
FEI Number:	41-1440870	FEI Number Applied For ()	FEI Num	nber Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
1200 SOUT	DRATION SYST FH PINE ISLAN DN, FL 33324					
The above in the State	named entity su of Florida.	ubmits this statement for the p	ourpose of	f changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:					
	Electronic	Signature of Registered Age	ent		Date	
Election Cam	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LATENDRESSE,	ALE LAKE BLVD., STE 1400		Title: Name: Address: City-St-Zip:	CFO (X) Change () Addition LATENDRESSE, ALFRED L 8500 NORMANDALE LAKE BLVD., STE 1400 BLOOMINGTON, MN 55437 US	
Title: Name: Address: City-St-Zip:	D () I DETERS, WILLIA 774 MAYS BLVD INCLINE VILLAG	. #10		Title: Name: Address: City-St-Zip:	D (X) Change () Addition YOUNGHANZ, TERRY L 700 W 47TH ST., STE 350 KANSAS CITY, MO 64112 US	
Title: Name: Address: City-St-Zip:	MURPHY, JEFFF	ALE LAKE BLVD.,STE 1400		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	COB ()[GOODWYNE, JO 3865 FAIRHOME WAYZATA, MN	S ROAD		Title: Name: Address: City-St-Zip:	COB (X) Change () Addition ROSE, WILLIAM 700 W 47TH ST., STE 350 KANSAS CITY, MO 64112 US	
Title: Name: Address: City-St-Zip:	KOSCHINSKA, G	IEHAHA PARKWAY		Title: Name: Address: City-St-Zip:	D (X) Change () Addition HART, TODD 700 W 47TH ST., STE 350 KANSAS CITY, MO 64112 US	
Title: Name: Address: City-St-Zip:	D () I PROSSER, JOHI 600 EAST FOUR CHASKA, MN 55	TH STREET		Title: Name: Address: City-St-Zip:	D (X) Change () Addition BURKE, PAUL 700 W 47TH ST., STE 350 KANSAS CITY, MO 64112	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFRED L LATENDRESSE CFO 02/07/2008