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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600002410 (6)

ATLAS FOUNDATION CO.

AMERY WI 54001

PETERSON, DAVID I

1707 - 207TH LANE

STANNARD, BRADLEY J

GUNDERSON, ELIZABETH J

4851 MCALLISTER AVE.

ST. MICHAEL MN 55376

WEINGART, PAUL S

10821 IRWIN SOUTH

5232 SEABURY ROAD

MOUND MN 55364

CEDAR MN 55011

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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NAME

Principal Place of Business

P.O. BOX 117 P.O. BOX 117 ROGERS MN 55374 ROGERS MN 55374-0117 3. Date Incorporated or Qualified 3a. Date of Last Report 05/14/1996 FIRST ONE 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 41-0919012 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes 📈 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33324** 83 64 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, 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 🔲 DELETË ☐ Change Addition 1.5 TITLE NAME STANNARD, G.E. 1.2 NAME STREET ADDRESS 4933 THREE POINTS BLVD. 1.3 STREET ADDRESS MOUND MN 55364 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE Addition 2 1 11YLE MARCINIAK, DOUGLAS M NAME 2.2 NAME STREET ADDRESS 727 - 75TH ST. 2.3 STREET ADDRESS

2. 4 City - ST - ZiP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY - ST - 2IP

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

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4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 THE

6.2 NAME

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CITY-ST-ZIP

14. I do 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

MONATURE, SEASON SINGLE MASSIVE I

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Apr 30 1997 8:00am

Secretary of State