## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000006020

FILED Jaņ 0<u>8, 2</u>010 Secretary of State

**Entity Name: NORTHWESTERN COLLEGE CORPORATION** 

**Current Principal Place of Business: New Principal Place of Business:** 

3003 SNELLING AVE., N. ST. PAUL, MN 55113

**Current Mailing Address: New Mailing Address:** 

3003 SNELLING AVENUE NORTH ATTN: DOUGLAS SCHROEDER, VP, CFO

ST. PAUL, MN 55113

FEI Number: 41-0711610 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

CURETON, ALAN DR Name: Address: 3003 SNELLING AVE N City-St-Zip: ST PAUL, MN 55113

Title:

Name: BALZER, ALICE Address: 3003 SNELLING AVE N City-St-Zip: SAINT PAUL, MN 55113

Title:

SAYRE, GROVER Name: Address: 3003 SNELLING AVE. N. City-St-Zip: SAINT PAUL, MN 55113

Title: CFOT

Name: SCHROEDER, DOUGLAS Address: 3003 SNELLING AVE. N. City-St-Zip: SAINT PAUL, MN 55113

Title:

KELBY, DAVID Name: 3003 SNELLING AVE N Address: City-St-Zip: SAINT PAUL, MN 55113

Title: VCBT

ROBERTSON, SARAH Name: Address: 3003 SNELLING AVE. N. SAINT PAUL, MN 55113 City-St-Zip:

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUGLAS R SCHROEDER **CFO** 01/08/2010