

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90070 027 ***150.00

DOCUMENT # F97000001571

1. Entity Name
CAFE SFA - MINNEAPOLIS, INC.



Principal Place of Business
**750 LAKESHORE PARKWAY
TAX DEPT.
BIRMINGHAM, AL 35211**

Mailing Address
**750 LAKESHORE PARKWAY
TAX DEPT.
BIRMINGHAM, AL 35211**

40053898



03262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
22-2377052

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**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

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

(NOTE: Registered Agent signature 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**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	COLTHARP, DOUGLAS
STREET ADDRESS	750 LAKESHORE PARKWAY
CITY-ST-ZIP	BIRMINGHAM, AL 35211
TITLE	VT
NAME	BURTON, WES
STREET ADDRESS	750 LAKESHORE PKWY
CITY-ST-ZIP	BIRMINGHAM, AL 35211
TITLE	VAS
NAME	HUTKAI, STEVEN
STREET ADDRESS	750 LAKESHORE PARKWAY
CITY-ST-ZIP	BIRMINGHAM, AL 35211
TITLE	VAS
NAME	BENTLEY, JULIA
STREET ADDRESS	115 N. CALDERWOOD ST.
CITY-ST-ZIP	ALCOA, TN 37701
TITLE	EVAS
NAME	WILLIS, KEVIN
STREET ADDRESS	750 LAKESHORE PARKWAY
CITY-ST-ZIP	BIRMINGHAM, AL 35211
TITLE	VS
NAME	HANSEN, CHARLES J
STREET ADDRESS	750 LAKESHORE PKWY
CITY-ST-ZIP	BIRMINGHAM, AL 35211

**DO NOT WRITE
IN THIS SPACE**

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:

Steven J. Hutkai
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/07
Date

(205)940-4745
Daytime Phone #