

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000002055

1. Entity Name
OSMONICS, INC.

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90046 001 ***150.00

901650



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5951 CLEARWATER DR MINNETONKA MN 55343		Mailing Address 5951 CLEARWATER DR MINNETONKA MN 55343	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 41-0955759	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: 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!!! FEE IS \$150.00 After MAY 1, 2001 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
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP SPATZ, D. DEAN 5951 CLEARWATER DR MINNETONKA MN 55343 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SPATZ, R. CAROL 5951 CLEARWATER DR MINNETONKA MN 55343 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DICKE, HOWARD W 5951 CLEARWATER DR MINNETONKA MN 55343 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Finance RUNZHEIMER, L. LEE 5951 Clearwater Drive Minnetonka MN 55343 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO ROBINSON, KEITH 5951 CLEARWATER DR MINNETONKA MN 55343 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MILLER, ROGER 5951 CLEARWATER DR MINNETONKA MN 55343 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President/COO Edward S Fierko 5951 Clearwater Drive Minnetonka MN 55343 ☐ Change ☐ Addition

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: LL RUNZHEIMER 5 Jan 01 952-988-6655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)