

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000000617

1. Entity Name

NORSTAN FINANCIAL SERVICES, INC.

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90017 027 ***150.00

Principal Place of Business

605 HWY 169 N.
PLYMOUTH MN 55441

Mailing Address

5101 SHADY OAK RD
MINNETONKA MN 55343-4100

2. Principal Place of Business

5101 SHADY OAK ROAD

3. Mailing Address

Suite, Apt. #, etc.

City & State

MINNETONKA, MN

City & State

Zip

55343

Country

USA

Zip

Country

4. FEI Number

41-1345503

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION CO
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(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, 2000 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

11. OFFICERS AND DIRECTORS

TITLE PD
NAME RICHARD, DAVID R
STREET ADDRESS 1125 SPRING HILL RD
CITY-ST-ZIP WAYZATA MN 55391 ☒ Delete

TITLE V
NAME VOLD, ROBERT J
STREET ADDRESS 15410-48TH AVE NORTH
CITY-ST-ZIP PLYMOUTH MN ☒ Delete

TITLE S.
NAME SELL, NEIL I
STREET ADDRESS 140 CARLSON PKY
CITY-ST-ZIP MINNETONKA MN 55305 ☐ Delete

TITLE T
NAME MACKENZIE, KENNETH S
STREET ADDRESS 382 BOVEY ROAD
CITY-ST-ZIP WAYZATA MN ☒ Delete

TITLE CD
NAME BASZUCKI, PAUL
STREET ADDRESS 250 WAKEFIELD ROAD
CITY-ST-ZIP WAYZATA MN ☐ Delete

TITLE T
NAME VOLD, ROBERT J
STREET ADDRESS 15410 48 AVE N.
CITY-ST-ZIP PLYMOUTH MN 55446 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME JERRY LEHRMAN
STREET ADDRESS 11785- 40th Place N
CITY-ST-ZIP Plymouth MN 55441 ☐ Change ☒ Addition

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PCD
NAME PAUL BASZUCKI ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/13/00

(612) 352-4000

CR21 304- (9/97)