2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# F98000006474

Entity Name: G.M. NORTHRUP CORPORATION

Current Principal Place of Business:

15950 FRANKLIN TRAIL SE
PRIOR LAKE, MN 55372

New Principal Place of Business:

Current Mailing Address:

15950 FRANKLIN TRAIL SE
PRIOR LAKE, MN 55372

New Mailing Address:

FEI Number: 41-1565415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, RAY
6 OAK COURT
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: NORTHRUP, GLEN M
Address: 17240 JUDICIAL ROAD
City-St-Zip: LAKEVILLE, MN 55044 US

Title: V ( ) Delete
Name: NORTHRUP, JEROME P
Address: 26640 DREXEL
City-St-Zip: NEW PRAGUE, MN

Title: ST ( ) Delete
Name: NORTHRUP, JOHN P
Address: 16285 HUDSON AVE
City-St-Zip: LAKEVILLE, MN 55044 US

Title: VP ( ) Delete
Name: NORTHRUP, NANETTE I
Address: 17240 JUDICIAL ROAD
City-St-Zip: LAKEVILLE, MN 55044 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN NORTHRUP ST 01/16/2009

Electronic Signature of Signing Officer or Director — Date