

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90400 029 ***150.00

0608200 AT

DOCUMENT # F98000006770

1. Entity Name

DATALINK CORPORATION OF MINNESOTA

Principal Place of Business

**7423 WASHINGTON AVE. S.
 MINNEAPOLIS MN 55439**

Mailing Address

**7423 WASHINGTON AVE. S.
 MINNEAPOLIS MN 55439**

2. Principal Place of Business

8170 Upland Circle
 Suite, Apt. #, etc.

3. Mailing Address

8170 Upland Circle
 Suite, Apt. #, etc.

City & State

Chanhassen, MN

City & State

Chanhassen, MN

Zip

Country

55317-9625 United States

Zip

Country

55317-9625 United States

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 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

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, 2002 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 **PCEO** ☐ Delete
 NAME **MELAND, GREG R**
 STREET ADDRESS **7423 WASHINGTON AVENUE SOUTH**
 CITY-ST-ZIP **MINNEAPOLIS MN 55439**

TITLE **VP** ☐ Delete
 NAME **HOWE, STEPHEN M**
 STREET ADDRESS **7423 WASHINGTON AV S**
 CITY-ST-ZIP **MINNEAPOLIS MN 55439**

TITLE **CFO** ☐ Delete
 NAME **KINSELLA, DAN**
 STREET ADDRESS **7423 WASHINGTON AVENUE SOUTH**
 CITY-ST-ZIP **MINNEAPOLIS MN 55439**

TITLE **CTO** ☐ Delete
 NAME **ROBINSON, SCOTT D**
 STREET ADDRESS **7423 WASHINGTON AV S**
 CITY-ST-ZIP **MINNEAPOLIS MN 55439**

TITLE **VP** ☐ Delete
 NAME **TORGERSO, HELEN**
 STREET ADDRESS **7423 WASHINGTON AV S**
 CITY-ST-ZIP **MINNEAPOLIS MN 55439**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Vice President of Human Resources and Administration** ☐ Change ☒ Addition
 NAME **Mary West**
 STREET ADDRESS **8170 Upland Circle**
 CITY-ST-ZIP **Chanhassen, MN 55317-9625**

TITLE **PLEASE CHANGE THE ADDRESSES OF ALL 5 CORPORATE OFFICERS IN BLOCK 11 TO:** ☐ Change ☐ Addition
 NAME **8170 Upland Circle**
 STREET ADDRESS **Chanhassen MN 55317-9625**
 CITY-ST-ZIP

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

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

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

TITLE **Vice President of Corporate and Business Development** ☐ Change ☒ Addition
 NAME **Charles B. Westling**
 STREET ADDRESS **8170 Upland Circle**
 CITY-ST-ZIP **Chanhassen, MN 55317-9625**

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:

Dan Kinsella
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CP2E034(9/01)

4/10-2002 752.879.4816