

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000209

FILED  
Mar 30, 2012  
Secretary of State

**Entity Name:** POLARIS SALES & SERVICE INC.

**Current Principal Place of Business:**

2100 HIGHWAY 55  
MEDINA, MN 55340

**New Principal Place of Business:**

2100 HIGHWAY 55  
MEDINA, MN 55340 US

**Current Mailing Address:**

2100 HIGHWAY 55  
MEDINA, MN 55340

**New Mailing Address:**

2100 HIGHWAY 55  
MEDINA, MN 55340 US

**FEI Number:** 41-1921490

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MORGAN, BENNETT J PD  
Address: 2100 HIGHWAY 55  
City-St-Zip: MEDINA, MN 55340 US

Title: VS  
Name: BOGART, STACY L VS  
Address: 2100 HIGHWAY 55  
City-St-Zip: MEDINA, MN 55340 US

Title: TD  
Name: MALONE, MICHAEL W TD  
Address: 2100 HIGHWAY 55  
City-St-Zip: MEDINA, MN 55340 US

Title: CEOD  
Name: WINE, SCOTT W CEOD  
Address: 2100 HIGHWAY 55  
City-St-Zip: MEDINA, MN 55340 US

I hereby 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 all other like empowered.

SIGNATURE: MANDELIN HENDRICKS

POA

03/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date