2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L94088

Entity Name: MLD MINNESOTA 10, INC.

FILED Apr 16, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1640 MADISON AVENUE MANKATO, MN 56001 **Current Mailing Address: New Mailing Address:** PO BOX 3248 MANKATO, MN 560023248 US FEI Number: 59-3031096 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 US 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete () Change () Addition ALTON, ROBERT D JR Name: Name: 221 EAST HICKORY STREET Address: Address: City-St-Zip: MANKATO, MN 56001 City-St-Zip: PCOO Title: Title: () Delete () Change () Addition LOMBARD, F. ERNEST Name: Name: 1650 MADISON AVENUE, STE 100 Address: Address: MANKATO, MN 56001 City-St-Zip: City-St-Zip: Title: Title: VCFO () Delete () Change () Addition CHRISTENSEN, DAVID A Name: Name: 221 EAST HICKORY STREET Address: Address: City-St-Zip: MANKATO, MN 56001 City-St-Zip: Title: () Delete Title: (X) Change () Addition CHRISTIANSEN, DAVID A CHRISTENSEN, DAVID A Name: Name: Address: 221 EAST HICKORY STREET Address: 221 EAST HICKORY STREET City-St-Zip: MANKATO, MN 56001 City-St-Zip: MANKATO, MN 56001 Title: Title: GM () Delete () Change () Addition WILKE, GERALD B Name: Name: 1640 MADISON AVENUE Address: Address: City-St-Zip: MANKATO, MN 56001 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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:	DAVID A CHRISTENSEN	VCFO	04/16/2002