

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002716

FILED
Mar 07, 2006
Secretary of State

Entity Name: MOTIV ACTION, LLC

Current Principal Place of Business:

16355 36TH AVENUE NORTH
SUITE 100
MINNEAPOLIS, MN 55446

New Principal Place of Business:

Current Mailing Address:

16355 36TH AVENUE NORTH
SUITE 100
MINNEAPOLIS, MN 55446

New Mailing Address:

FEI Number: 41-1950744

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

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: BRYSON, WILLIAM
Address: 3082 WILLOW DRIVE
City-St-Zip: MEDINA, MN 55340

Title: D () Delete
Name: BEEGLE, JEFF
Address: 17761 CASCADE DR
City-St-Zip: EDEN PRAIRIE, MN 55347

Title: D () Delete
Name: SJAARDA, MARLYN
Address: 11720 38TH AVE N
City-St-Zip: MINNEAPOLIS, MN 55441

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PAMELA MONTEON

HR

03/07/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date