

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000005568

Entity Name: MARSDEN SERVICES, L.L.C.

**FILED**  
**Feb 14, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

380 ST. PETER ST., SUITE 760  
ST PAUL, MN 55102

## **New Principal Place of Business:**

380 ST. PETER ST.  
STE 603  
ST PAUL, MN 55102

## **Current Mailing Address:**

380 ST. PETER ST., SUITE 760  
ST PAUL, MN 55102

## **New Mailing Address:**

380 ST. PETER ST.  
STE 603  
ST PAUL, MN 55102

FEI Number: 27-3206624

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: MGR  
Name: MINGO, GUY  
Address: 380 ST. PETER ST., SUITE 603  
City-St-Zip: ST PAUL, MN 55102

Title: MGR  
Name: REID, CHRISTOPHER W  
Address: 380 ST. PETER ST., SUITE 603  
City-St-Zip: ST PAUL, MN 55102

Title: MGR  
Name: MORANTZ, SITA  
Address: 380 ST. PETER ST., SUITE 603  
City-St-Zip: ST PAUL, MN 55102

Title: MGR  
Name: FLOM, CRAIG  
Address: 10350 BREN ROAD WEST  
City-St-Zip: MINNETONKA, MN 55343

I hereby 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: CHRISTOPHER W. REID

MGR

02/14/2012

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