

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90041 045 ****61.25

DOCUMENT # N07000010974					
1. Entity Name CLASSICAL SOUTH FLORIDA INC					
Principal Place of Business ONE SE THIRD AVE., STE. 2800 MIAMI, FL 33131-1714			Mailing Address ONE SE THIRD AVE., STE. 2800 MIAMI, FL 33131-1714		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address Box 26-1417978			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Miami, FL			
Zip	Country	Zip 33152	Country		
6. Name and Address of Current Registered Agent RAATTAMA, HENRY H. JR. ONE SE THIRD AVE., STE. 2800 MIAMI, FL 33131-1714			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete <div style="font-size: 2em; margin-top: 10px;">See attached</div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Thomas J. Kigin			651-290-1500		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

Thomas J. Kigin, Secy

ATTACHMENT

46078606

N07000010974

CLASSICAL SOUTH FLORIDA
2008 Not-For-Profit Corporation Annual Report
FEIN 26-1417978

Attachment A

BLOCK 10: Officers and Directors

William H. Kling, Chair
480 Cedar Street
Saint Paul, MN 55101

Thomas J. Kigin, Secretary/CEO
480 Cedar Street
Saint Paul, MN 55101

Jon R. McTaggart, Vice Chair/Principal Officer
480 Cedar Street
Saint Paul, MN 55101

Mark E. Alfuth, CFO
480 Cedar Street
Saint Paul, MN 55101

Sarah Lutman, Vice President
480 Cedar Street
Saint Paul, MN 55101

Gayle M. Ober, Vice President
480 Cedar Street
Saint Paul, MN 55101

Jon K. Gossett, Vice President
480 Cedar Street
Saint Paul, MN 55101

Timothy R. Roesler, Vice President
480 Cedar Street
Saint Paul, MN 55101