

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **N93000001620 (4)**

1. Corporation Name

HARMON GLASS FOUNDATION FOR HIGHWAY SAFETY, INC.

Principal Place of Business

Mailing Address

**4000 OLSON MEMORIAL HWY
#600
MINNEAPOLIS MN 55422-5334
US**

**7900 XERXES AVENUE SOUTH
SUITE 1800
MINNEAPOLIS MN 55431**

3. Date Incorporated or Qualified

04/08/1993

4. FEI Number

59-3186101 41-1812266

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☒ DELETE

NAME **D ANDERSON, LARRY C**
STREET ADDRESS **4000 OLSON MEMORIAL HWY #600**
CITY-ST-ZIP **MINNEAPOLIS MN 55422-5334**

1.2 TITLE ☒ DELETE

NAME **D WALSH, DARYL**
STREET ADDRESS **4000 OLSON MEMORIAL HWY, #600**
CITY-ST-ZIP **MINNEAPOLIS MN 55422-5334**

1.3 TITLE ☒ DELETE

NAME **D GARDNER, WILLIAM G**
STREET ADDRESS **7900 XERXES AVENUE SOUTH #1800**
CITY-ST-ZIP **MINNEAPOLIS MN 55431-1159**

1.4 TITLE ☐ DELETE

NAME **AST JOHNSON, GARY R**
STREET ADDRESS **7900 XERES AVE S., #1800**
CITY-ST-ZIP **MINNEAPOLIS MN**

1.5 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

NAME **Director Donald Goldens**
STREET ADDRESS **1900 Xerxes Ave S., #1800**
CITY-ST-ZIP **Minneapolis, MN 55431**

2.1 TITLE ☐ Change ☒ Addition

NAME **Director Robert Baumgartner**
STREET ADDRESS **4000 Olson Memorial Hwy #600**
CITY-ST-ZIP **Minneapolis, MN 55431**

3.1 TITLE ☐ Change ☒ Addition

NAME **CEO James L. Martineau**
STREET ADDRESS **7900 Xerxes Ave S., #1800**
CITY-ST-ZIP **Minneapolis, MN 55431**

4.1 TITLE ☐ Change ☒ Addition

NAME **Treasurer Percy C. Tomlinson**
STREET ADDRESS **4000 Olson Memorial Hwy #600**
CITY-ST-ZIP **Minneapolis, MN 55431**

5.1 TITLE ☐ Change ☒ Addition

NAME **Secretary Martha L. Richards**
STREET ADDRESS **7900 Xerxes Ave S., #1800**
CITY-ST-ZIP **Minneapolis, MN 55431**

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature] Gary Johnson Asst. Treas 4/30/98

612-835-1874

CR2E037 (10/97)