2002 Uniform Business Report (UBR)

Apr 02, 2002 8:00 am Secretary of State DOCUMENT # P01086 1. Entity Name 04-02-2002 90909 010 ***150.00 LIFETOUCH PORTRAIT STUDIOS INC. Principal Place of Business Mailing Address 11000 VIKING DR 11000 VIKING DR SUITE 200 SUITE 200 **EDEN PRAIRIE MN 55344 EVEN PRAIRIE MN 55344** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 56-0841239 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES STREET SUITE 105 TALLAHASSEE FL 32301 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CR2E034 (9/01) TITLE TITLE ☐ Addition COP ☐ Delete NAME NAME HARMEL, PAUL O STREET ADDRESS STREET ADDRESS 11000 VIKING DR SUITE 200 CITY-ST-ZIP CITY-ST-ZIP **EDEN PRAIRIE MN 55344** TITLE ☐ Delete TITLE ☐ Change ☐ Addition VSEG NAME NAME HASSEL, RICHARD A STREET ADDRESS STREET ADDRESS 11000 VIKING DR SUITE 200 CITY-ST-ZIP CITY-ST-ZIP EDEN PRAIRIE MN 55344 DDE Delete TITLE vPO X Change ☐ Addition **VPIS** NAME MILNE, PAUL D STREET ADDRESS STREET ADDRESS 11000 VIKING DRIVE SUITE 200 CITY-ST-ZIP CITY-ST-ZIP EDEN PRAIRIE MN 55344 ☐ Delete TITLE ☐ Change Addition **CFO** NAME NAME PLADSON, RANDOLPH J. STREET ADDRESS STREET ADDRESS 11000 VIKING DR SUITE 200 CITY-ST-ZIP CITY-ST-ZIP **EDEN PRAIRIE MN 55344** TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME RYAN, TIMOTHY STREET ADDRESS STREET ADDRESS 11000 VIKING DR, SUITE 200 CITY-ST-ZIP CITY-ST-ZIP **EDEN PRAIRIE MN 55344** ☐ Change TITLE TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZiP CITY-ST-ZIP 13. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 11 or Block 12 if

SIGNATURE:

changed, or on an attachment y

address, with all other like empowered