

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Mar 18 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P09795 (6)
1. Corporation Name
T.E. IBBERSON COMPANY



Principal Place of Business Mailing Address
**828 FIFTH STREET SOUTH
HOPKINS MN 55343
US** **828 FIFTH STREET SOUTH
HOPKINS MN 55343-7752
US**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/16/1986	3a. Date of Last Report 02/23/1996
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 41-0326340		Applied For <input type="checkbox"/> Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)	
83.				84. City	
				85. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATKKE, DUNNLEY L.	1.2 NAME	
STREET ADDRESS	17196 ROUND LAKE RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	EDEN PRAIRIE MN	1.4 CITY-ST-ZIP	
TITLE	STD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAHLE, RAYMOND K.	2.2 NAME	
STREET ADDRESS	1415 TRAYMORE AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MINNETONKA MN	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCORMICK, MICHAEL J	3.2 NAME	
STREET ADDRESS	11203 RADISSON DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	BURNSVILLE MN	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HANSON, WALTER D.	4.2 NAME	
STREET ADDRESS	2020 PENNSYLVANIA AVE NO	4.3 STREET ADDRESS	
CITY-ST-ZIP	GOLDEN VALLEY MN	4.4 CITY-ST-ZIP	
TITLE	VPD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIMES, STEVEN C	5.2 NAME	
STREET ADDRESS	17109 NEW MARKET DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	EDEN PRAIRIE MN 55347	5.4 CITY-ST-ZIP	
TITLE	VPD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEUKAM, GERALD M	6.2 NAME	
STREET ADDRESS	15639 TARLETON CREST	6.3 STREET ADDRESS	
CITY-ST-ZIP	MAPLE GROVE MN 55311	6.4 CITY-ST-ZIP	

14. I do 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 607, Florida Statutes; and that my name appears on Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: Raymond K. Dahle Date: **3/10/97** Daytime Phone #: **(612) 928 7007**
Raymond K. Dahle, Secretary

CR2E034 (9/96)