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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P09795

(6)

T.E. IBBERSON COMPANY

FILED
Feb 05 1998 8:00am
Secretary of State

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Principal Place of Business Mailing Address					· · · · · · · · · · · · · · · · · · ·		11 ginte mint arbit ninft enst
829 FIFTH STREET SOUTH			828 FIFTH STREET SOUTH				
HOPKINS MN 55343			HOPKINS MN 55343				
US			US		DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 04/16/1986	
2. Principal Place of Business			2a. Mailing Address			4. FEI Number	Applied For
21			26			41-0326340	Not Applicable
Sulte, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22			27		Certificate of Status Desired	Fee Required	
City & State			City & State			6. Election Campaign Financing	\$5.00 May Be
23			28			Trust Fund Contribution	Added to Fees
Zip		Country	Z <del>i</del> p	Coun	ry	8. This corporation owes or has paid the cu	urrent year Intangible
24	25	L	29	_, 30		, , , , , , , , , , , , , , , , , , , ,	<b>XX</b> Yes ☐ No
		d Address of Current	t Registered Agent			10. Name and Address of New Registered	Agent
	CORPORATIO			[	1 Name		
1200 <b>S</b> . PINE ISLAND ROAD				5	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324							
•				Ε	3		
				6	4 City	FI	85 Zip Code
11. Pursuant	to the provisions	of Sections 607 0502	and 607 1508. Florida St	latules the abo	ve-panied co		of changing its registered
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							
Signature typed or proted name of registered agont and title if applicable (NOTE).					gont signature requ	uired when reinstating) DA1E	
12.	TPark	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PD NATTUE D	4 IN IN I TO 4	DELETE	1.1 TITLE			Change Addition
NAME	MATTKE, D			1.2 NAM	E		}
STREET ADDRESS	STREET ADDRESS 17196 ROUND LAKE RD. EDEN PRAIRIE MN			1.3 STRE	ET ADDRESS		
CITY-ST-ZIP		RIE MN		1.4 C(TY	- ST - ZIP		
TITLE	STU		☐ DELETE	2.1 TITL			Change Addition
NAME	DAHLE, RA			2.2 NAM	£		
STREET ADDRESS 1415 TRAYMORE AVENUE				2.3 S1R	ET ADDRESS		
CITY-ST-ZIP	MINNETON	KA MN		2.4 CIT	- ST - ZIP		
TITLE	VD		DELETE	3.1 TITL:			Change Addition
NAME		K, MICHAEL J		3.2 NAM	£		
STREET ADDRESS	11203 RAD	isson dr		3.3 STRE	et address		

MAPLE GROVE MN 55311

14. Thereby 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 in Block 12 or Block 13 if chapsed, or on an attachment with an address.

3 4. CITY - ST - ZIP

4.3 STHEET ADDRESS

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CHY-ST-ZIP

4.4 CITY-ST-ZIP

41 111LE

4 2 NAME

5 1 TITLE

52 NAME

6.1 THLE

6.2 NAME

SIGNATUDE:

**BURNSVILLE MN** 

HANSON, WALTER D.

**GOLDEN VALLEY MN** 

KIMES, STEVEN C

2020 PENNSYLVANIA AVE NO

17109 NEW MARKET DRIVE

**EDEN PRAIRIE MN 55347** 

**15639 TARLETON CREST** 

LEUKAM, GERALD M

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

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DELETE

DELETE

Raymond K. Dahle, Secretary 01/20/98

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Change

Change

Addition

Addition