

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90144 033 ***150.00

DOCUMENT # P11796

1. Entity Name

WETTERAU FINANCE CO.



Principal Place of Business

11840 VALLEY VIEW ROAD
EDEN PRAIRIE MN 54344
US

Mailing Address

P.O. BOX 990
ATTN: TAX DEPT
MINNEAPOLIS MN 55440
US

2. Principal Place of Business

11840 Valley View Road
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 990 - Tax Dept.
Suite, Apt. #, etc.



MOORE

CR2E034 (11/03)

City & State

Eden Prairie, MN

City & State

Minneapolis, MN

4. FEI Number

43-6046942

Applied For

Not Applicable

Zip

55344

Country

USA

Zip

55440

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road

City Plantation

FL

Zip Code 33324

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	BOEHNEN, DAVID L	
STREET ADDRESS	11840 VALLEY VIEW RD	
CITY-ST-ZIP	EDEN PRAIRIE MN 55344	
TITLE	VPS	<input type="checkbox"/> Delete
NAME	BREEDLOVE, JOHN P	
STREET ADDRESS	11840 VALLEY VIEW ROAD	
CITY-ST-ZIP	EDEN PRAIRIE MN 55344	
TITLE	VP	<input type="checkbox"/> Delete
NAME	STOFFEL, JAMES L	
STREET ADDRESS	11840 VALLEY VIEW RD	
CITY-ST-ZIP	EDEN PRAIRIE MN 55344	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	HEYING, GREGORY C	
STREET ADDRESS	11840 VALLEY VIEW RD	
CITY-ST-ZIP	EDEN PRAIRIE MN 55344	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/04 952-906-6589
Date Daytime Phone #