

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12430

Entity Name: ABHE & SVOBODA, INC.

FILED  
Jan 16, 2006  
Secretary of State

## Current Principal Place of Business:

17066 REVERE WAY  
PRIOR LAKE, MN 55372 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 251  
PRIOR LAKE, MN 55372

## New Mailing Address:

FEI Number: 41-1224817

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: SVOBODA, GAIL,  
Address: 4040 GRAINWOOD, BOX 477  
City-St-Zip: PRIOR LAKE, MN 55372 US

Title: SD ( ) Delete  
Name: SVOBODA, ROXANE,  
Address: 4040 GRAINWOOD, BOX 477  
City-St-Zip: PRIOR LAKE, MN 55372 US

Title: V ( ) Delete  
Name: MEYER, PAUL E  
Address: 17835 KESTREL COURT  
City-St-Zip: LAKEVILLE, MN 55375 US

Title: V ( ) Delete  
Name: HOLLE, DON D  
Address: PO BOX 265  
City-St-Zip: PRIOR LAKE, MN 55372 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: SVOBODA, JAMES J VP  
Address: 91-161 OLAI STREET  
City-St-Zip: KAPOLEI, HI 96707 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROXANE SVOBODA

SECR

01/16/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date