


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2005 08:00 AM
Secretary of State

| | | |
|---|---|---|
| DOCUMENT # P17237 1. Entity Name ROGERS BENEFIT GROUP, INC. | |  |
| Principal Place of Business 80 SOUTH EIGHT ST STE 4628 MINNEAPOLIS, MN 55402-224 US | Mailing Address 80 SOUTH EIGHT ST STE 4628 MINNEAPOLIS, MN 55402-224 US | |



DO NOT WRITE IN THIS SPACE

01112005 No Chg-P CR2E034 (10/03)

| | |
|---|--|
| 4. FEI Number 41-1596522 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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 UIC # applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U00000343517
04/29/05-80099-003 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD ROGERS, JOHN E. 755 TONKAWA ROAD LONG LAKE, MN 55356 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD ROGERS, JAMES P. 80 S 8TH ST STE 4628 MINNEAPOLIS, MN 55402 |
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **John E. Rogers**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/05 (612) 332-8866
Date Daytime Phone #