


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90024 005 ***150.00

DOCUMENT # P20779					
1. Entity Name C.R.I. SECURITIES, INC.					
Principal Place of Business 400 N. ROBERT STREET ST. PAUL, MN 55101			Mailing Address 400 N. ROBERT STREET ST. PAUL, MN 55101		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 41-1612506	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		FL
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		9. \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	SEE ATTACHED LISTING	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDS, PHILLIP C.		NAME		
STREET ADDRESS	8301 N GOLF DRIVE		STREET ADDRESS		
CITY-ST-ZIP	PARADISE VALLEY, AZ 85253		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VASOS, DAVID		NAME		
STREET ADDRESS	2500 OVERLOOK DRIVE		STREET ADDRESS		
CITY-ST-ZIP	BLOOMINGTON, MN 55431		CITY-ST-ZIP		
TITLE	PCEO	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONNOLLY, GEORGE I.		NAME		
STREET ADDRESS	9660 INDIGO TRAIL		STREET ADDRESS		
CITY-ST-ZIP	GRANT, MN 55115		CITY-ST-ZIP		
TITLE	VPS	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, LOYALL E		NAME	13417 MORGAN AVE. SOUTH	
STREET ADDRESS	7065 UNITY AVENUE NORTH		STREET ADDRESS	BURNSVILLE, MN 55337	
CITY-ST-ZIP	BROOKLYN CENTER, MN 55429		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUNSTAD, ROBERT E		NAME	1502 VIOLET LANE	
STREET ADDRESS	1650 BLACKHAWK COVE		STREET ADDRESS	EAGAN, MN 55122	
CITY-ST-ZIP	SAINT PAUL, MN 55122		CITY-ST-ZIP		
TITLE	VCOO	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JORGENSEN, MICHAEL J		NAME		
STREET ADDRESS	4510 FREMONT AVE. SOUTH		STREET ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS, MN 55409		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: <i>Kimberly K Carpenter</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE: 4/16/04	
				Daytime Phone #: 651-665-5986	

CRI SECURITIES, INC.

Officers

02/27/2004

<u>Name and Title</u>	<u>CRD#</u>	<u>Residence Address</u>	<u>Business Address</u>
George I. Connolly President and CEO	1457599	9860 Indigo Trail Grant, MN 55115	400 Robert Street North St. Paul, MN 55101
Loyall E. Wilson Vice President, Secretary and CCO	1368670	13417 Morgan Avenue South Burnsville, MN 55337	400 Robert Street North St. Paul, MN 55101
Lynda S. Czarnetzki Treasurer	1571494	678 Bridle Ridge Road Eagan, MN 55123	400 Robert Street North St. Paul, MN 55101
David Vasos Vice President	1060243	2500 Overlook Drive Bloomington, MN 55431	2701 University Avenue SE Minneapolis, MN 55414
Michael J. Jorgensen Vice President and COO	2676329	4510 Fremont Avenue South Minneapolis, MN 55409	400 Robert Street North St. Paul, MN 55101
Carol M. Arel Assistant Secretary	3274516	7750 Greenwood Dr. Mounds View, MN 55112	400 Robert Street North St. Paul, MN 55101
Eric J. Bentley Assistant Secretary	4061997	1655 Eleanor Avenue St. Paul, MN 55116	400 Robert Street North St. Paul, MN 55101
Kimberly K. Carpenter Assistant Secretary	4266541	6024 Park Avenue Minneapolis, MN 55417	400 Robert Street North St. Paul, MN 55101
Phillip C. Richards Director	375618	8301 N. Golf Drive Paradise Valley, AZ 85253	2701 University Avenue SE Minneapolis, MN 55414
Robert E. Hunstad Director	1480417	1502 Violet Lane Eagan, MN 55122	400 Robert Street North St. Paul, MN 55101
Thomas P. Burns Director	1028109	16155 49 th Place North Plymouth, MN 55446	400 Robert Street North St. Paul, MN 55101
Scott H. Richards Director	1907215	5380 Howards Point Road Shorewood, MN 55331	2701 University Avenue SE Minneapolis, MN 55414

Attachment

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P20779