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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P22422

(0)

BRW PLANNING, TRANSPORATION AND ENGINEERING, INC

Principal Place of Business Mailing Address 700 3 ST SO. 700 3 ST SO. MINNEAPOLIS. MN 55415 MINNEAPOLIS. MN 55415-1130 3. Date Incorporated or Qualified 3a. Date of Last Report 01/05/1989 05/01/1996 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 41-1625272 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite Apt #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 28 23 Country Źω Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) 82 PLANTATION FL 33324 83 84 City Zip Code 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 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. Lam familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Stor also I typeshic per trip can uniforgistered agent and title Capplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1 1 TITLE 111.6 onald Hunt 389 5 Joliet Way LARSON, STEVEN E 1.2 NAME NAMe 9800 BROOKSIDE AVE. 1.3 STREET ADDRESS STREET ADDRESS Englewood CO 80111 **BLOOMINGTON MN** 1.4 CITY-ST-ZIP COTY-ST-ZIP Change X Addition **O**ELETE 2 1 TITLE THUE Glenn Martin 1701 Gdf Rood, Suite 1000 MALMQUIST, JAN K. 2.2 NAME 1110 JAMES 2.3 STREET ADDRESS STREET ADDRESS ST. PAUL MN 2.4 CITY-ST-ZIP Kollina Meadaws II City-S" Addition DELETE 3.1 TITLE TELLE AS MCPHEE, MARTHA NAME 3.2 NAME 1360 FRENCH CREEK DR **3.3 STREET ADDRESS** STREET ALLERESS **WAYZATA MN** 3.4. C(TY - ST - Z(P CH Y - ST - 2W Addition Change DELETE VTD. 4.1 TITLE 1:11 Wolsfeld, Richard 4. 2 NAME NAM: 2523 MANITOU ISLAND 4.3 STREET ADDRESS STREET ADORESS WHITE BEAR LAKE MN 4.4 CITY - ST - ZIP CCY ST ZP Change Addition DELETE 5.1 THILE 1000 AYAZ, SABRI 5.2 NAME NAME 8780 COTTONWOOD DR 5.3 STREET ADDRESS STREET ADDRESS **EDEN PRAIRIE MN** 54 CITY-ST-ZIP CHY-ST-Z6 Addition DELETE 61 TITLE AMUNDSEN, CRAIG A 6.2 NAME NAME 5984 ROYAL OAKS DR 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

C. D. S1 - 741

SHOREVIEW MN

2200 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. Lide 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 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 changed, or on an attachment with an address. (412) 370 -0700

FILED

Mar 10 1997 8:00am

Secretary of State

(96/6)

CR2E034