

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90051 007 ***158.75

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DOCUMENT # P22422

1. Corporation Name

BRW PLANNING, TRANSPORTATION AND ENGINEERING, INC

Principal Place of Business
700 3 ST SO.
MINNEAPOLIS, MN 55415

Mailing Address
700 3 ST SO.
MINNEAPOLIS, MN 55415

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/05/1989

4. FEI Number

41-1625272

Applied For
Not Applicable

5. Certificate of Status Desired: ☒ ~~No~~

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME HUNT, DONALD
STREET ADDRESS 5289 S. JOILET WAY
CITY-ST-ZIP ENGLEWOOD CO

TITLE SD ☐ DELETE

NAME MARTIN, GLENN
STREET ADDRESS 1701 GOLF RD, SUITE 100
CITY-ST-ZIP ROLLING MEADOWS IL

TITLE V ☐ DELETE

NAME MCPHEE, MARTHA
STREET ADDRESS 1360 FRENCH CREEK DR
CITY-ST-ZIP WAYZATA MN

TITLE V ☐ DELETE

NAME WOLSFELD, RICHARD
STREET ADDRESS 2523 MANITOU ISLAND
CITY-ST-ZIP WHITE BEAR LAKE MN

TITLE V ☐ DELETE

NAME AYAZ, SABRI
STREET ADDRESS 8780 COTTONWOOD DR
CITY-ST-ZIP EDEN PRAIRIE MN

TITLE V ☐ DELETE

NAME AMUNDSEN, CRAIG A.
STREET ADDRESS 5984 ROYAL OAKS DR
CITY-ST-ZIP SHOREVIEW MN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)