

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P23528

1. Entity Name

PREMIUMWEAR, INC.

Principal Place of Business

5500 FELTL ROAD
MINNETONKA MN 55343

Mailing Address

5500 FELTL ROAD
MINNETONKA MN 55343-7920

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

41-0429620

Applied For

Not Applicable

5. Certificate of Status Desired. ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD GLEASON, THOMAS D 656 MANHATTAN ROAD GRAND RAPIDS MI 49506	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERG, DAVID E 4905 POPPY LANE EDINA MN 55435	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BURY, JAMES S 3302 GETTYSBURG AVE. N. NEW HOPE MN 55427	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BOEDEKER, CYNTHIA L 6710 MANCHESTER DRIVE CHANHASSEN MN 55317	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOUSTON, JOHN R 6712 WEST SHORE DRIVE EDINA MN 55435	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, C. DEREK 20 KITE HILL LANE MILL VALLEY CA 94941	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Benson, Keith A 8403 Crane Danco Trail Eden Prairie, MN 55344	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Kosloff, Alan 433 Ward Parkway Kansas City, MO 64112	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Magnuson, Gerald E 654 Woodland Circle Edina, MN 55424	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vittent, Mark B 750 South Price Ladue, MO 63124	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B Bennett, Frank 4704 White Oak Road Edina, MN 55424	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 11 or Block 12 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 #

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90150 018 ***150.00



DO NOT WRITE IN THIS SPACE

4/27/00

612-979-1700 x5037