2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32552

FILED Jan 08, 2009 Secretary of State

Entity Name: DANNY'S CONSTRUCTION COMPANY, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 1066 W THIRD AVE SHAKOPEE, MN 55379 **Current Mailing Address: New Mailing Address:** P.O. BOX 11 SHAKOPEE, MN 55379 FEI Number: 41-0960593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR., STE. 4 WESTON, FL 33331 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: CFO (X) Change () Addition O'BRIEN, KEIRAN W., Name: Name: O'BRIEN, KEIRAN W., 1066 W 3RD AVE 1066 W 3RD AVE Address: Address: City-St-Zip: SHAKOPEE, MN City-St-Zip: SHAKOPEE, MN 55379 Title: Title: () Delete (X) Change () Addition SCHNEIDER, ALISSA M Name: Name: SCHNEIDER, ALISSA M 1066 W 3RD AVE 1066 W 3RD AVE Address: Address: SHAKOPEE, MN City-St-Zip: SHAKOPEE, MN 55379 City-St-Zip: () Delete VPF Title: Title: () Change () Addition GRIMSRUD, DAVID L Name: Name: 1066 W 3RD AVE Address: Address: City-St-Zip: SHAKOPEE, MN 55379 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition HANSON, WILLIAM P Name: Name: Address: 1066 W 3RD AVE Address: City-St-Zip: SHAKOPEE, MN 55379 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID L. GRIMSRUD VPF 01/08/2009