

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2003 8:00 am
Secretary of State

08-11-2003 90280 017 *****61.25

DOCUMENT # P34200

1. Entity Name

INSTITUTE FOR RESEARCH AND EDUCATION INC.



Principal Place of Business

**3800 PARK NICOLLET BLVD
MINNEAPOLIS MN 55416
US**

Mailing Address

**3800 PARK NICOLLET BLVD
MINNEAPOLIS MN 55416
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **41-0961862**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HANSON, A. STUART ☒ Delete
STREET ADDRESS 3800 PARK NICOLLET BLVD.
CITY-ST-ZIP MINNEAPOLIS MN 55416

TITLE P
NAME Perry, Paul ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME ANDERSON, RENNER ☐ Delete
STREET ADDRESS 3800 PARK NICOLLET BLVD.
CITY-ST-ZIP MINNEAPOLIS MN 55416

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE C
NAME JACOTT, WILLIAM ☒ Delete
STREET ADDRESS 3800 PARK NICOLLET BLVD.
CITY-ST-ZIP MINNEAPOLIS MN 55416

TITLE C
NAME Colombo, Barbara ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME AMREN, DON ☒ Delete
STREET ADDRESS 3800 PARK NICOLLET BLVD.
CITY-ST-ZIP MINNEAPOLIS MN 55416

TITLE TD
NAME ABELSON, David ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME THOMPSON, WALTER MD ☒ Delete
STREET ADDRESS 3800 PARK NICOLLET BLVD.
CITY-ST-ZIP MINNEAPOLIS MN 55416

TITLE S
NAME Miley, Mary ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE EVD
NAME TOSCANO, JAMES V ☐ Delete
STREET ADDRESS 3800 PARK NICOLLET BLVD.
CITY-ST-ZIP MINNEAPOLIS MN 55416

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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 617, 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:

Curtis P. Savstrom

Curtis P. Savstrom
Controller

7/31/03

952-993-7606

CR2E037 (4/03)