

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P92000001980

FILED  
Apr 03, 2003  
Secretary of State

Entity Name: GEMINI DIGITAL PRODUCTS CORP.

## Current Principal Place of Business:

701 S. 5TH ST.  
HOPKINS, MN 55343 US

## New Principal Place of Business:

6035 CULLIGAN WAY  
MINNETONKA, MN 55345 US

## Current Mailing Address:

701 S. 5TH ST.  
HOPKINS, MN 55343 US

## New Mailing Address:

6035 CULLIGAN WAY  
MINNETONKA, MN 55345 US

FEI Number: 65-0365280

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: WALLER, BRIAN  
Address: 701 S. 5TH ST.  
City-St-Zip: HOPKINS, MN 55343 US

Title: ST ( ) Delete  
Name: O'NEIL, MICHAEL  
Address: 701 S. 5TH ST.  
City-St-Zip: HOPKINS, MN 55343 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WALLER, BRIAN  
Address: 6035 CULLIGAN WAY  
City-St-Zip: MINNETONKA, MN 55345 US

Title: ST (X) Change ( ) Addition  
Name: O'NEIL, MICHAEL  
Address: 6035 CULLIGAN WAY  
City-St-Zip: MINNETONKA, MN 55345 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL O'NEIL

ST

04/03/2003

Electronic Signature of Signing Officer or Director

Date