

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000050707

Entity Name: LEE COUNTY MINING, INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

16070 TAMIAMI TRL S
PUNTA GORDA, FL 33955 US

New Principal Place of Business:

Current Mailing Address:

15210 WAYZATA BLVD
WAYZATA, MN 55391 US

New Mailing Address:

FEI Number: 65-0690837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, GAREY
FOWLER, WHITE, BOGGS & BANKER, PA
2235 FIRST STREET
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

BUTLER, GAREY
FOWLER WHITE BOGGS P.A.
2235 FIRST STREET
FORT MYERS, FL 33901 US

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:

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NESLUND, RICHARD
Address: 15210 WAYZATA BLVD
City-St-Zip: WAYZATA, MN 55391

Title: S () Delete
Name: FIER, JAMES E
Address: 15210 WAYZATA BLVD
City-St-Zip: WAYZATA, MN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RICHARD NESLUND

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date