

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000066090

FILED
Apr 20, 2009
Secretary of State

Entity Name: TED GLASRUD ASSOCIATES OF DELAND, FL, INC.

Current Principal Place of Business:

124 TREEMONTE DR
ORANGE CITY, FL 32763

New Principal Place of Business:

132 TREEMONTE DR
ORANGE CITY, FL 32763

Current Mailing Address:

431 S. 7TH ST., #2470
MINNEAPOLIS, MN 55415

New Mailing Address:

1700 WEST HWY 36
SUITE 650
ROSEVILLE, MN 55113

FEI Number: 59-3487729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASRUD, THEODORE G
124 TREEMONTE DR.
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

GLASRUD, THEODORE G
132 TREEMONTE DR.
ORANGE CITY, FL 32763 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:

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLASRUD, THEODORE G
Address: 3634 SE FAIRWAY EAST
City-St-Zip: STUART, FL 34997 US

Title: ST () Delete
Name: POHL, GERRY J
Address: 3317 EDWARD ST NE
City-St-Zip: ST. ANTHONY, MN 55418 US

Title: VP () Delete
Name: KUEHN, PAUL
Address: 5928 POND VIEW DRIVE
City-St-Zip: SHOREVIEW, MN 55126 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: GERRY POHL

ST

04/20/2009

Electronic Signature of Signing Officer or Director

Date