## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000000473

City-St-Zip: MINNEAPOLIS, MN 55418 US

Entity Name: BLUE SPRINGS INVESTMENTS, INC

FILED Apr 20, 2009 Secretary of State

Entity Nar	ME: BLUE SPRINC	55 INVESTMENTS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
124 TREEMONTE DR. ORANGE CITY, FL 32763				132 TREEMONTE DR. ORANGE CITY, FL 32763	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
431 S. 7TH ST. #2470 MINNEAPOLIS, MN 55415			1700 WEST HYW 36 SUITE 650 ROSEVILLE, MN 551		
FEI Number:	: 59-3487723 FE	Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
THEODORE G. GLASRUD 124 TREEMONTE DR. ORANGE CITY, FL 32763 US			132 TREEMONTE DR	THEODORE G. GLASRUD 132 TREEMONTE DR. ORANGE CITY, FL 32763 US	
	named entity subme of Florida.	its this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				04/20/2009	
	Electronic Si	gnature of Registered Age	ent	Date	
Election Can	npaign Financing Trus	t Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ) Delet GLASRUD, THEODO 3634 SE FAIRWAY E STUART, FL 34997 U	RE G AST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP ( ) Delet KUEHN, PAUL 5428 POND VIEW DE SHOREVIEW, MN 58	RIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	ST () Delet POHL, GERRY 3317 EDWARD ST		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: GERRY POHL ST 04/20/2009