

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90465 050 \*\*\*150.00

**DOCUMENT # V49497**

1. Entity Name

WILSONS LEATHER OF FLORIDA INC. ✓



Principal Place of Business

7401 BOONE AVE NO  
BROOKLYN PARK, MN 55428 US ✓

Mailing Address

ATTN: TAX DEPT  
7401 BOONE AVE NO  
BROOKLYN PARK, MN 55428 US ✓

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04242007

Chg-P

CR2E034 (12/06)

4. FEI Number

41-1728910 ✓

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301

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 \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	S	(See Attachment) <input type="checkbox"/> Delete
NAME	LAPINKSY, CORRINE	
STREET ADDRESS	7401 BOONE AVE NO	
CITY-ST-ZIP	MINNEAPOLIS, MN 55428	
TITLE	TDCF	<input type="checkbox"/> Delete
NAME	KRUSE, STACY	
STREET ADDRESS	7401 BOONE AVE. N	
CITY-ST-ZIP	BROOKLYN PARK, MN 55428	
TITLE	DCEC	<input type="checkbox"/> Delete
NAME	SEERLES, MICHAEL M	
STREET ADDRESS	7401 BOONE AVE. N.	
CITY-ST-ZIP	MINNEAPOLIS, MN 55428	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Searles, Michael M.	
STREET ADDRESS	7401 Boone Ave. N.	
CITY-ST-ZIP	Brooklyn Park, MN 55428	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V. Hutchison, William S.	
STREET ADDRESS	7401 Boone Ave. N.	
CITY-ST-ZIP	Brooklyn Park, MN 55428	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V. Boucher, M. Adam	
STREET ADDRESS	7401 Boone Ave. N.	
CITY-ST-ZIP	Brooklyn Park, MN 55428	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V. Tripp, Michael J.	
STREET ADDRESS	7401 Boone Ave. N.	
CITY-ST-ZIP	Brooklyn Park, MN 55428	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stacy Kruse

4/24/07

Date

763-391-4452

Daytime Phone #

# OFFICERS AND DIRECTORS LIST

03/14/07

WILSONS CENTER INC

ROSEDALE WILSONS INC/ RIVER HILLS WILSONS INC/ WILSONS LEATHER HOLDINGS INC/ BERMAN'S THE LEATHER EXPERTS INC/ SUBSIDIARIES

## Directors

Name	Title	Address	Telephone	Effective Date
Michael M. Searles	Director	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	02/07/05
Stacy A. Kruse	Director	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	01/20/06

## Officers

Name	Title	Address	Telephone	Effective Date
Michael M. Searles	Chief Executive Officer, Chairman	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	12/01/04
Corrine G. Lapinsky	Secretary	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	11/01/96
Stacy A. Kruse	Chief Financial Officer and Treasurer	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	01/09/06
William S. Hutchison	Vice President	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	09/30/05
M. Adam Boucher	Vice President	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	08/29/05
Michael J. Tripp	Vice President	7401 Boone Ave. No., Brooklyn Park, MN 55428	763-391-4000	12/14/06

ATTACHMENT

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