

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002076

Entity Name: LOL FINANCE CO.**Current Principal Place of Business:**4001 N. LEXINGTON AVE
ARDEN HILLS, MN 55126**Current Mailing Address:**4001 N. LEXINGTON AVE
ARDEN HILLS, MN 55126 US**FEI Number:** 41-1388499**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name GLIENKE, DAN L.
Address 4001 N. LEXINGTON AVE
City-State-Zip: ARDEN HILLS MN 55126

Title SECRETARY
Name MIESEN, JONATHAN
Address 4001 N. LEXINGTON AVE
City-State-Zip: ARDEN HILLS MN 55126

Title DIRECTOR
Name THELEN, MIKE R.
Address 4001 N. LEXINGTON AVE
City-State-Zip: ARDEN HILLS MN 55126

Title DIRECTOR
Name PIEPER, WILLIAM T.
Address 4001 N. LEXINGTON AVE
City-State-Zip: ARDEN HILLS MN 55126

Title CHAIRMAN
Name PIEPER, WILLIAM T.
Address 4001 N. LEXINGTON AVE
City-State-Zip: ARDEN HILLS MN 55126

Title CHIEF LENDING OFFICER
Name CRAWFORD, LANCE
Address 4001 N. LEXINGTON AVE
City-State-Zip: ARDEN HILLS MN 55126

Title AUTHORISED SIGNATORY
Name IRLBECK, ROBERT L.
Address 4001 N. LEXINGTON AVE
City-State-Zip: ARDEN HILLS MN 55126

I hereby 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 all other like empowered.

SIGNATURE: DAN GLIENKE**CEO****04/23/2021**

Electronic Signature of Signing Officer/Director Detail

Date