

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006909

Entity Name: FAGEN, INC. OF MINNESOTA**Current Principal Place of Business:**501 W. HWY. 212
GRANITE FALLS, MN 56241**Current Mailing Address:**PO BOX 159
GRANITE FALLS, MN 56241**FEI Number:** 41-1604605**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	PRESIDENT, CEO
Name	HOWARD, CHRISTOPHER
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

Title	CFO, SECRETARY
Name	KOSMINSKAS, BREANNA
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

Title	DIRECTOR
Name	LINDEMAN, LARRY
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

Title	DIRECTOR
Name	EWALD, SAM
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

Title	DIRECTOR
Name	ANDERSON, BEN
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

Title	DIRECTOR
Name	REED, CHELSEY
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

Title	DIRECTOR
Name	JOHNSON, AMY
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

Title	DIRECTOR
Name	JOHNSON, STEVE
Address	501 W. HWY. 212
City-State-Zip:	GRANITE FALLS MN 56241

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: BREANNA KOSMINSKAS**CFO, SECRETARY****03/03/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date