


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90444 033 ***150.00

DOCUMENT # F01000002933 1. Entity Name BBC INSURANCE AGENCY, INC.					
Principal Place of Business 7601 PENN AVE. S TAX DEPT. RICHFIELD, MN 55423			Mailing Address PO BOX 9312 TAX DEPT MINNEAPOLIS, MN 55440		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 44-2000251	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
NRAI SERVICES, INC. 526 E. PARK AVE. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANDERSON, BRADBURY H 7075 FLYING CLOUD DRIVE EDEN PRAIRIE, MN 55344 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7601 Penn Ave. S. Richfield, MN 55423		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LENZMEIER, ALLEN U 7075 FLYING CLOUD DRIVE EDEN PRAIRIE, MN 55344 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7601 Penn Ave. S. Richfield, MN 55423		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD JACKSON, DARREN R 7075 FLYING CLOUD DRIVE EDEN PRAIRIE, MN 55344 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7601 Penn Ave. S. Richfield, MN 55423		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS JOYCE, JOSEPH M 7075 FLYING CLOUD DRIVE EDEN PRAIRIE, MN 55344 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7601 Penn Ave. S. Richfield, MN 55423		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT KOTULA, CONSTANCE 7075 FLYING CLOUD DRIVE EDEN PRAIRIE, MN 55344 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition G. Michael Tilton 7601 Penn Ave. S. Richfield, MN 55423		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STEELE, CHRISTOPHER R. 7075 FLYING CLOUD DRIVE EDEN PRAIRIE, MN 55344 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 another like empowered.					
SIGNATURE: <u>G. Michael Tilton</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			6. Michael Tilton Date		
			612/291-1000 Daytime Phone #		