

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002598

Entity Name: TASTEFULLY SIMPLE, INC.

FILED  
Feb 15, 2007  
Secretary of State

## Current Principal Place of Business:

1920 TURNING LEAF LANE SE  
ALEXANDRIA, MN 56308

## New Principal Place of Business:

1920 TURNING LEAF LANE SW  
ALEXANDRIA, MN 56308 US

## Current Mailing Address:

1920 TURNING LEAF LANE SE  
ALEXANDRIA, MN 56308

## New Mailing Address:

1920 TURNING LEAF LANE SW  
PO BOX 3006  
ALEXANDRIA, MN 563083006 US

FEI Number: 41-1811345

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PC ( ) Delete  
Name: BLASHACK, JILL  
Address: 1920 TURNING LEAF LANE SE  
City-St-Zip: ALEXANDRIA, MN 56308

Title: VD ( ) Delete  
Name: NIELSON, JOANI  
Address: 1920 TURNING LEAF LANE SE  
City-St-Zip: ALEXANDRIA, MN 56308

Title: S ( ) Delete  
Name: CASPERS, CHRISTY  
Address: 1920 TURNING LEAF LANE SE  
City-St-Zip: ALEXANDRIA, MN 56308

Title: CFO (X) Delete  
Name: MILLER, RICHARD F  
Address: 1920 TURNING LEAF LANE SE  
City-St-Zip: ALEXANDRIA, MN 56308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: BLASHACK STRAHAN, JILL  
Address: 1920 TURNING LEAF LANE SW  
City-St-Zip: ALEXANDRIA, MN 56308

Title: COO (X) Change ( ) Addition  
Name: NIELSON, JOANI  
Address: 1920 TURNING LEAF LANE SW  
City-St-Zip: ALEXANDRIA, MN 56308

Title: CFO (X) Change ( ) Addition  
Name: MILLER, RICHARD F  
Address: 1920 TURNING LEAF LANE SW  
City-St-Zip: ALEXANDRIA, MN 56308

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: RICHARD F. MILLER

CFO

02/15/2007

Electronic Signature of Signing Officer or Director

Date