

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005899

FILED
Apr 13, 2006
Secretary of State

Entity Name: GANDER MOUNTAIN COMPANY

Current Principal Place of Business:

180 EAST FIFTH STREET, SUITE 1300
ST. PAUL, MN 55101

New Principal Place of Business:

Current Mailing Address:

180 EAST FIFTH STREET, SUITE 1300
ST. PAUL, MN 55101

New Mailing Address:

FEI Number: 41-1990949 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: CD () Delete
Name: ERICKSON, GERALD A
Address: 180 EAST FIFTH STREET, SUITE 1300
City-St-Zip: ST. PAUL, MN 55101

Title: PCEO () Delete
Name: BAKER, MARK R
Address: 180 EAST FIFTH STREET, SUITE 1300
City-St-Zip: ST. PAUL, MN 55101

Title: VCFO () Delete
Name: LINDAHL, DENNIS M
Address: 180 EAST FIFTH STREET, SUITE 1300
City-St-Zip: ST. PAUL, MN 55101

Title: V () Delete
Name: AVALLONE, CURT V
Address: 180 EAST FIFTH STREET, SUITE 1300
City-St-Zip: ST. PAUL, MN 55101

Title: V () Delete
Name: CARLIN, ANDREW P
Address: 180 EAST FIFTH STREET, SUITE 1300
City-St-Zip: ST. PAUL, MN 55101

Title: VS () Delete
Name: JACOBSEN, ERIC C
Address: 180 EAST FIFTH STREET, SUITE 1300
City-St-Zip: ST. PAUL, MN 55101

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: V (X) Change () Addition
Name: LINK, SHARON K
Address: 180 EAST FIFTH STREET, SUITE 1300
City-St-Zip: ST. PAUL, MN 55101

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

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: DENNIS LINDAHL

Electronic Signature of Signing Officer or Director

VCFO

04/13/2006

Date