#### 2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000002665

Entity Name: ELIM CARE FOUNDATION (INCORPORATED)

FILED
Jan 18, 2018
Secretary of State
CC8995495936

## **Current Principal Place of Business:**

7485 OFFICE RIDGE CIR EDEN PRAIRIE, MN 55344

### **Current Mailing Address:**

7485 OFFICE RIDGE CIR EDEN PRAIRIE, MN 55344 US

FEI Number: 41-4694817 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

HOLCK, CHRIS 5600 HERITAGE BLVD WILDWOOD, FL 34785 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 Title DIRECTOR

NameDAHL, ROBERT MNameBRUNSCHEEN, SCOTTAddress7485 OFFICE RIDGE CIRAddress1355 S WILLOW CIR

City-State-Zip: EDEN PRAIRIE MN 55344 City-State-Zip: WEST DES MOINES IA 50266

Title DIRECTOR Title DIRECTOR

Name GOODEN, KEN REV Name JEAN HILL, DONNA Address 3749 LAWNDALE LN N Address 734 AMBER DR

City-State-Zip: PLYMOUTH MN 55446-2956 City-State-Zip: ST PAUL MN 55126-4101

Title DIRECTOR Title DIRECTOR

Name JOHNSON, LAVERN "VERN" G Name LARSON, JAN

Address 8940 JASPER AVE NW Address 3819 25TH STREET NW City-State-Zip: ANNANDALE MN 55302-2444 City-State-Zip: WAVERLY MN 55390

Title DIRECTOR Title DIRECTOR

NamePETERSON, ROLANDNamePRENTISS, ROBERTAddress235 CRAIGBROOK WAY NEAddress2370 SIOUX COURT

City-State-Zip: FRIDLEY MN 55432 City-State-Zip: NEW BRIGHTON MN 55112

#### Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHRYN YOUNGQUIST

**CFO** 

01/18/2018

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR Title CFO

NameWESSMAN, HENRYNameYOUNGQUIST, KATHRYNAddress1594 SUNDANCE DRIVEAddress7485 OFFICE RIDGE CIRCLECity-State-Zip:FARGO ND 58104City-State-Zip:EDEN PRAIRIE MN 55344