7485 OFFICE RIDGE CIR	
EDEN PRAIRIE, MN 55344	

Entity Name: ELIM CARE FOUNDATION (INCORPORATED)

2019 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

### **Current Mailing Address:**

DOCUMENT# F1500002665

7485 OFFICE RIDGE CIR EDEN PRAIRIE, MN 55344 US

**Current Principal Place of Business:** 

# FEI Number: 41-4694817

# Name and Address of Current Registered Agent:

ELLIS, SHELBY 12120 CO. RD 103 OXFORD, FL 34484 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:	SHELBY ELLIS			04/26/2019
	Electronic Signature of Registered Agent			Date
Officer/Direct	or Detail :			
Title 0	CEO	Title	DIRECTOR	
Name [	DAHL, ROBERT M	Name	BRUNSCHEEN, SCOTT	
Address 7	7485 OFFICE RIDGE CIR	Address	1355 S WILLOW CIR	
City-State-Zip: E	EDEN PRAIRIE MN 55344	City-State-Zip:	WEST DES MOINES IA 50266	
Title [	DIRECTOR	Title	DIRECTOR	
Name 0	GOODEN, KEN REV	Name	JEAN HILL, DONNA	
Address 3	3749 LAWNDALE LN N	Address	734 AMBER DR	
City-State-Zip: F	PLYMOUTH MN 55446-2956	City-State-Zip:	ST PAUL MN 55126-4101	
Title [	DIRECTOR	Title	DIRECTOR	
Name 0	COLGAN, DAN	Name	LARSON, JAN	
Address 6	625 WEST 31ST STREET	Address	3819 25TH STREET NW	
City-State-Zip: N	MINNEAPOLIS MN 55408-2974	City-State-Zip:	WAVERLY MN 55390	
Title [	DIRECTOR	Title	DIRECTOR	
Name F	PETERSON, ROLAND	Name	PRENTISS, ROBERT	
Address 2	235 CRAIGBROOK WAY NE	Address	2370 SIOUX COURT	
City-State-Zip: F	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.

CFO

04/26/2019 Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	CFO
Name	WESSMAN, HENRY	Name	YOUNGQUIST, KATHRYN
Address	1594 SUNDANCE DRIVE	Address	7485 OFFICE RIDGE CIRCLE
City-State-Zip:	FARGO ND 58104	City-State-Zip:	EDEN PRAIRIE MN 55344