

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 27, 2001 8:00 am
Secretary of State

07-27-2001 90001 046 ***550.00

0136743 AT

DOCUMENT # F99000003274

1. Entity Name
MAGNUS SERVICES, INC.

Principal Place of Business: **6909 EAST GREENWAY PARKWAY SCOTTSDALE AZ 85254**
 Mailing Address: **6909 EAST GREENWAY PARKWAY SCOTTSDALE AZ 85254**

2. Principal Place of Business: **17600 N. Perimeter Dr.**
 Suite, Apt. #, etc.

3. Mailing Address: **10900 Wayzata Blvd.**
 Suite, Apt. #, etc.

City & State: **Scottsdale, AZ**
 Zip: **85255** Country: **Maricops**

City & State: **Minnetonka, MN**
 Zip: **55305** Country: **Hennepin**



DO NOT WRITE IN THIS SPACE

4. FEI Number: **41-1940906** Applied For: Not Applicable:

5. Certificate of Status Desired: **\$8.75** Additional Fee Required:

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		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.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: DIR NAME: ZEBECK, RONALD N STREET ADDRESS: 600 SOUTH HIGHWAY 169, SUITE 1800 CITY-ST-ZIP: ST. LOUIS PARK MN 55426	<input type="checkbox"/> Delete	TITLE: _____ NAME: 10900 Wayzata Blvd STREET ADDRESS: Minnetonka, MN 55305 CITY-ST-ZIP: _____	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DIR NAME: WESSELINK, DAVID D STREET ADDRESS: 600 SOUTH HIGHWAY 169, SUITE 1800 CITY-ST-ZIP: ST. LOUIS PARK MN 55426	<input type="checkbox"/> Delete	TITLE: _____ NAME: 10900 Wayzata Blvd. STREET ADDRESS: Minnetonka, MN 55305 CITY-ST-ZIP: _____	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DIR NAME: BARCLIFT, Z. JILL STREET ADDRESS: 600 SOUTH HIGHWAY 169, SUITE 1800 CITY-ST-ZIP: ST. LOUIS PARK MN 55426	<input checked="" type="checkbox"/> Delete	TITLE: Director NAME: Douglas B. Mayblum STREET ADDRESS: 8020 Corporate Drive CITY-ST-ZIP: White Marsh, MD 21236	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: DP NAME: REAK, DAVID R STREET ADDRESS: 6909 EAST GREENWAY PARKWAY CITY-ST-ZIP: SCOTTSDALE AZ 85254	<input type="checkbox"/> Delete	TITLE: _____ NAME: 17600 North Perimeter Drive STREET ADDRESS: Scottsdale, AZ 85255 CITY-ST-ZIP: _____	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP NAME: SLACK, EARL STREET ADDRESS: 8020 CORPORATE DRIVE CITY-ST-ZIP: WHITE MARSH MD 21236	<input type="checkbox"/> Delete	TITLE: Secretary NAME: Richard G. Evans STREET ADDRESS: 10900 Wayzata Blvd. CITY-ST-ZIP: Minnetonka, MN 55305	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: T NAME: BENSON, JEAN STREET ADDRESS: 600 SOUTH HIGHWAY 169, SUITE 1800 CITY-ST-ZIP: ST. LOUIS PARK MN 55426	<input checked="" type="checkbox"/> Delete	TITLE: Treasurer NAME: Ralph A. Than STREET ADDRESS: 10900 Wayzata Blvd. CITY-ST-ZIP: Minnetonka, MN 55305	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address and all other like empowered.

SIGNATURE: *Richard G. Evans* **7/18/01 (952) 358-4339**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFR2E094 (5/01)

Attachment Doc# F990000003274

A0079020

metris

COMPANIES

Metris Companies Inc.
10900 Wayzata Boulevard
Minnetonka, MN 55305

Phone 952 525-5020
Fax 952 593-4891

July 20, 2001

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, Florida 32302-1500

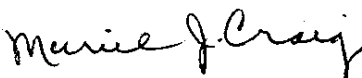
Re: magnUS Services, Inc.

Dear Sir/Madam:

Enclosed for filing is our 2001 Uniform Business Report and check in the amount of \$550.00 in payment of the fees.

If you should have any questions, please call me at (952) 358-4658.

Sincerely,



Muriel J. Craig
Paralegal

enclosures