No. C 184085 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Due no later than Aug 31, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. COLLECTOR'S INSURANCE AGENCY, INCORPORATED 4040 WEST 70TH STREET EDINA MN 55435		2. Registered	2. Registered Agent and Address (NO PO BOX) C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:*			
				921 S ORCI BOISE ID USA				
4. Corporations: Enter	Names and Busin	ess Addresses of	President, Secretary, and Directors. Treasur	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	LESLIE BEND	DER	4040 WEST 70TH STREET	EDINA	MN	USA	55435	
TREASURER TIMOTHY J		MABRY	4040 WEST 70TH STREET	EDINA	MN	USA	55435	
DIRECTOR DEBRA CISK		ŒΥ	4040 WEST 70TH STREET	EDINA	MN	USA	55435	
DIRECTOR	RICHARD DOANE		4040 WEST 70TH STREET	EDINA	MN	USA	55435	
5. Organized Under the Laws of: 6.		6. Annual Report must be signed.*						
MN C 184085		Signature: Mandeline Hendricks			Date: 06/29/2013			
		Name (type o		Title: Poa				
Processed 06/29/2013	3	* Electronically p	rovided signatures are accepted as original s	ignatures.				