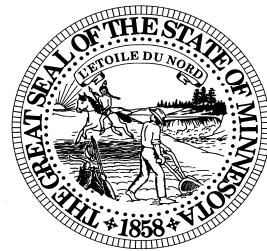


# Office of the Minnesota Secretary of State

## Minnesota Nonprofit Corporation | Annual Renewal

Minnesota Statutes, Section 5.34



**Must be filed by December 31**

**Read the instructions before completing this form.**

1. File Number: \_\_\_\_\_ 2. Governed Under the Laws of the State of: **MINNESOTA**

3. Corporate Name: (Required) \_\_\_\_\_

4. Registered Office and Agent

Registered Office Address: (Required)

Street Address (*A PO Box by itself is not acceptable*)

City

State

Zip

Registered Agent: (if applicable)

5. Name and business address of the Corporate President: (Required)

Name

Street Address

City

State

Zip Code

### Email Address for Official Notices

Enter an email address to which the Secretary of State can forward official notices required by law and other notices:

Check here to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.

**List a name and daytime phone number of a person who can be contacted about this form:**

Contact Name

Phone Number

**Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must register with the MN Dept. of Agriculture's Corporate Farm Program.**

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed?  
Yes  No

**NOTICE: Failure to file this form by December 31 of this year will result in the dissolution of this corporation without further notice from the Secretary of State, pursuant to Minnesota Statutes, section 317A.823.**



## Office of the Minnesota Secretary of State

### Minnesota Nonprofit Corporation | Annual Renewal

Minnesota Statutes, Section 5.34



### Minnesota Business Snapshot

To better serve Minnesotans, the Secretary of State's Office has created the "Minnesota Business Snapshot," a short and simple survey produced with the input of business owners, business organizations, non-profits, and researchers from across the state. These five questions will take less than three minutes to complete, and you may answer any or all of them. There is no penalty if you choose not to provide this information. However, the answers you do provide will create a useful pool of information for potential customers and inform the analysis of our quarterly "Minnesota Economic and Business Condition Reports". We do not independently verify the answers applicants provide. **Again, this survey is voluntary and the answers are considered public data.** Thank you.

1. (Select up to one) - How many Minnesota – based full time employees (or FTE equivalents) does this entity currently have?

- 0-5
- 6-50
- 51-200
- 201-500
- Over 500

2. (Select all that apply) - Does the owner or a member of the ownership group of this entity self-identify as a member of any of the following communities?

- Woman
- Member of a community of color
- Veteran
- Member of a disability community
- Member of an immigrant community

3. (Select up to one) - Using NAICS codes below, please select the code that best describes this entity. If you believe this entity falls into more than one category, please select the category that generates the majority of the entity's revenue.

- Agriculture, Forestry, Fishing and Hunting (Code 11)
- Mining (Code 21)
- Utilities (Code 22)
- Construction (Code 23)
- Manufacturing (Codes 31-33)
- Wholesale Trade (Code 42)
- Retail Trade (Codes 44-45)
- Transportation and Warehousing (Codes 48-49)
- Information (Code 51)
- Finance and Insurance (Code 52)
- Real Estate Rental and Leasing (Code 53)
- Professional, Scientific, and Technical Services (Code 54)
- Management of Companies and Enterprises (Code 55)
- Administrative and Support and Waste Management and Remediation Services (Code 56)
- Educational Services (Code 61)
- Health Care and Social Assistance (Code 62)
- Arts, Entertainment, and Recreation (Code 71)
- Accommodation and Food Services (Code 72)
- Other Services (except Public Administration) (Code 81)
- Public Administration (Code 92)

4. (Select up to one) Is this entity a full time or part time endeavor for those primarily responsible for operating this entity?

- Full time
- Part time

5. (Select up to one) - If applicable, what were this entity's gross revenues for the past year?

- \$0 - \$10,000
- \$10,001 - \$50,000
- \$50,001 - \$250,000
- \$250,001 - \$1M
- Over \$1M

## INSTRUCTIONS

**File your business document online by visiting our website at <http://mblsportalsos.state.mn.us/Business/Search>.**

All nonprofit corporations governed under *Minnesota Statutes*, Chapter 317A are required to file an annual renewal once every calendar year. Filing this Annual Renewal does not satisfy any other legal requirement. If Minnesota statutes or rules require a filing with another office, you must submit that filing separately.

If changes to the name or registered agent and office address are necessary, an amendment form along with the annual renewal form and applicable filing fee is required. Note: If you are amending the business or agent name, submit that amendment form along with the applicable filing fee. If you are changing the address only, no fee is required if you use the "Notice of Change of Registered Office/Registered Agent" form. Changes to the president's name and address can be made once a year by filing the annual renewal form with our office.

- 1. File Number:** Provide the file number issued by the Minnesota Secretary of State.
- 2. Home Jurisdiction:** This form is to be filed only if the state of incorporation is Minnesota.
- 3. Corporate Name:** (Required) List the organization name on file with the Secretary of State's office.
- 4. Registered Office Address and Agent, if any:** (Required) List the Registered Office Address and Agent, if any on file with the Secretary of State's office.
- 5. Name and Business Address of Corporate President:** (Required) Fill in the name and complete business address of the corporate president or person in charge of day to day activities, meetings, and/or who signs documents on behalf of the corporation.

**Email Address for Official Notices.** This email address may also be used to send annual renewal reminders and other important notices that may require action or response. Check the box if you wish to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.

**List a name and daytime telephone number of a person who can be contacted about this form.**

**Minnesota Business Snapshot.** This information is a snapshot of data at the point of time this filing was made. This information is voluntary and may be shared with other agencies or the public for data analysis.

There is no fee for filing the annual renewal. A nonprofit corporation that has been dissolved by our office for failure to file an annual renewal, may retroactively reinstate its existence by filing the current year's renewal.

Please submit all items together and mail to the address below:

**FILE IN-PERSON OR MAIL TO:**  
Minnesota Secretary of State - Business Services  
Retirement Systems of Minnesota Building  
60 Empire Drive, Suite 100  
St Paul, MN 55103  
(Staffed 8 a.m. – 4 p.m., Monday - Friday, excluding holidays)

Phone Lines: (9 a.m. - 4 p.m., M-F) Metro Area 651-296-2803; Greater MN 1-877-551-6767

All of the information on this form is public. Minnesota law requires certain information to be provided for this type of filing. If that information is not included, your document may be returned unfiled. This document can be made available in alternative formats, such as large print, Braille or audio tape, by calling (651)296-2803/voice. For a TTY/TTD (deaf and hard of hearing) communication, contact the Minnesota Relay Service at 1-800-627-3529 and ask them to place a call to (651)296-2803. The Secretary of State's Office does not discriminate on the basis of race, creed, color, sex, sexual orientation, national origin, age, marital status, disability, religion, reliance on public assistance or political opinions or affiliations in employment or the provision of service.

