

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212549930

1.) CORPORATION NAME:

Braun Intertec Corporation

DUE DATE: **12/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

CORPORATION SERVICE COMPANY

**Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1809963**

RICHMOND, VA 23219

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

MN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11001 HAMPSHIRE AVE S

CITY/ST/ZIP: MINNEAPOLIS, MN 55438

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: ROBERT J JANSSEN
TITLE: PRESIDENT
ADDRESS: 1826 BUERKLE ROAD
CITY/ST/ZIP/CO: ST PAUL, MN 55110

OFFICER DIRECTOR

NAME: DANIEL R HOLTE
TITLE: VICE PRESIDENT
ADDRESS: 11001 HAMPSHIRE AVE S
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55438

OFFICER DIRECTOR

NAME: GEORGE KLUEMPKE
TITLE: VICE PRESIDENT
ADDRESS: 11001 HAMPSHIRE AVENUE SOUTH
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55438

OFFICER DIRECTOR

NAME: STEVEN P NAGLE
TITLE: VICE PRESIDENT
ADDRESS: 526-10TH STREET NE #300
CITY/ST/ZIP/CO: WEST FARGO, ND 58504

OFFICER DIRECTOR

NAME: DAVID BOMERSINE
TITLE: VICE PRESIDENT
ADDRESS: 3900 ROOSEVELT RD #113
CITY/ST/ZIP/CO: ST. CLOUD, MN 56301

OFFICER DIRECTOR

NAME: MICHAEL L BRATRUD
TITLE: VICE PRESIDENT
ADDRESS: 11001 HAMPSHIRE AVE S
CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55438

OFFICER DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHARLES R BRENNER VICE PRESIDENT 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARVIN DENNE VICE PRESIDENT 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JULI DURDA VICE PRESIDENT 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY GEBHARD VICE PRESIDENT 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL M HEUER VICE PRESIDENT 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAY A HUBER VICE PRESIDENT 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGG R JANDRO VICE PRESIDENT 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JODI D NORMAN SECRETARY 1826 BUERKLE RD ST. PAUL, MN 55110	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JON A CARLSON CEO 11001 HAMPSHIRE AVENUE SOUTH MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARMEN M BORGESON ACTING CFO 11001 HAMPSHIRE AVE S MINNEAPOLIS, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GERALD FLODEN DIRECTOR 4140 4TH AVE S FARGO, ND 58103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: MARK PAYNE TITLE: DIRECTOR ADDRESS: 8860 FLESHER CIRCLE CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55347	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MICHAEL THYKEN TITLE: DIRECTOR ADDRESS: 8859 FLESHER CIR CITY/ST/ZIP/CO: EDEN PRAIRIE, MN 55347	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Linda Ireland TITLE: DIRECTOR ADDRESS: 400 N Robert St #1760 CITY/ST/ZIP/CO: St. Paul, MN 55101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Greg Bialon TITLE: VICE PRESIDENT ADDRESS: 11001 Hampshire Ave S CITY/ST/ZIP/CO: Minneapolis, MN 55438	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Ken Haag TITLE: VICE PRESIDENT ADDRESS: 1341 S 20th St CITY/ST/ZIP/CO: Bismarck, ND 58504	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ JODI D NORMAN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JODI D NORMAN, SECRETARY PRINTED NAME AND CORPORATE TITLE	12/27/2012 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		