# FORM 4

(Print or Type Responses)

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person\*

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

t)	Œ' o								X Direc			10% Owner		
(Last) (First) (Middle) 5480 NATHAN LANE N, SUITE 120			3. Date of Earliest Transaction (Month/Day/Year) 04/30/2013						Officer (give title below) X Other (specify below)  Chairman of the Board					
(Street) PLYMOUTH, MN 55442									6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
y)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu						lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	any	f Code (Instr. 8)		(A) or Disposed of		of (D)	Beneficially Owned Followin Reported Transaction(s)		Following	Form:	7. Nature of Indirect Beneficial Ownership	
			` · · · · ·	Code	V	Amount	(A) or (D)	Price	`	ĺ		or Indirect (I) (Instr. 4)	(Instr. 4)	
n Stock		04/30/2013		P		200	A	\$ 6.91	1,058,7	23		D		
n Stock		04/30/2013		P		100	A	\$ 6.915	1,058,8	23		D		
n Stock		04/30/2013		P		100	A	\$ 6.93	1,058,9	23		D		
n Stock		04/30/2013		P		100	A	\$ 6.934	1,059,0	23		D		
n Stock		04/30/2013		P		900	A	\$ 6.935	1,059,9	23		D		
n Stock		04/30/2013		P		300	A	\$ 6.939	1,060,2	23		D		
n Stock		04/30/2013		P		2,200	A	\$ 6.94	1,062,4	23		D		
n Stock		04/30/2013		P		1,800	A	\$ 6.95	1,064,2	23		D		
n Stock		04/30/2013		P		3,700	A	\$ 6.99	1,067,9	23		D		
n Stock		05/01/2013		P		600	A	\$ 6.99	1,068,5	23		D		
n Stock									176,760	)		I	Shares held by Spouse	
Report on a s	separate line f	or each class of secur	ities beneficially ov		Pers	ons who	respo	orm are	not requ	uired to res	spond unle	ess	1474 (9-02	
				-		-	-		ly Owned					
Title of 2. 3. Transaction 3A. Deemed Execution Date (Month/Day/Year) any		4. te, if Transaction Code Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D)	and Expiration Date (Month/Day/Year)  Amo Und Secu			ount of erlying irities		Derivative Securities Beneficiall Owned Following Reported	Owners Form o Derivat Securit Direct ( or India n(s) (I)	Owner (Instr. D)			
	Security  Security  Security  Security  Security  Security  Stock  Stock	UTH, MN 55442  (State)  Security  Security  Security  Stock  Stoc	Cap   Cap   Cap   Cap	UTH, MN 55442  (State)  (State)  (Zip)  Ta  2. Transaction Date (Month/Day/Year)  1. Stock  04/30/2013  1. Sto	Code	UTH, MN 55442   Cap   Table I - Non-Deta   Cap   Cap	Code	Company   Comp	Company   Comp	Conversion   Stock   O4/30/2013   P   100   A   S   6.935   1,059.9	Company   Comp	Code   Code	Country   2. Transaction   Date   Country   2. Transaction   Date   Country   Code   Code	

	Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
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### **Reporting Owners**

D (' O N /	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
ROTH RONALD G 5480 NATHAN LANE N SUITE 120 PLYMOUTH, MN 55442	X			Chairman of the Board				

# **Signatures**

Daniel Herzog by Power of Attorney for Ronald G. Roth	05/01/2013
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.