

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F07000001162

Entity Name: ESCALATE, INC.

**FILED**  
**Oct 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5505 MOREHOUSE DR STE 300  
SAN DIEGO, CA 92121

**New Principal Place of Business:**

**Current Mailing Address:**

5505 MOREHOUSE DR STE 300  
SAN DIEGO, CA 92121

**New Mailing Address:**

20700 SWENSON DRIVE  
WAUKESHA, WI 53186

FEI Number: 33-0444399

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DR STE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: ILSE, PAUL J  
Address: 3905 BROOKSIDE PARKWAY  
City-St-Zip: ALPHARETTA, GA 30022

Title: SECR  
Name: FESE, LAURA L  
Address: 20700 SWENSON DRIVE  
City-St-Zip: WAUKESHA, WI 53186

Title: DIR  
Name: ILSE, PAUL J  
Address: 3905 BROOKSIDE PARKWAY  
City-St-Zip: ALPHARETTA, GA 30022

Title: DIR  
Name: FESE, LAURA L  
Address: 20700 SWENSON DRIVE  
City-St-Zip: WAUKESHA, WI 53186

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LAURA L. FESE

DIR

10/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date