

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004756

FILED  
Mar 31, 2011  
Secretary of State

Entity Name: EXCEL A&E DESIGN GROUP, INC.

**Current Principal Place of Business:**

100 CAMELOT DRIVE  
FOND DU LAC, WI 54935

**New Principal Place of Business:**

**Current Mailing Address:**

100 CAMELOT DRIVE  
FOND DU LAC, WI 54935

**New Mailing Address:**

FEI Number: 39-1689347      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:           CHRP  
Name:           QUAST, JEFFREY M  
Address:        100 CAMELOT DRIVE  
City-St-Zip:    FOND DU LAC, WI 54935

Title:           VCHR  
Name:           SCHERMERHORN, THOMAS R  
Address:        100 CAMELOT DRIVE  
City-St-Zip:    FOND DU LAC, WI 54935

Title:           V  
Name:           SCHERMERHORN, THOMAS R  
Address:        100 CAMELOT DRIVE  
City-St-Zip:    FOND DU LAC, WI 54935

Title:           VD  
Name:           DEL PONTE, RAYMOND A  
Address:        100 CAMELOT DRIVE  
City-St-Zip:    FOND DU LAC, WI 54935

Title:           STD  
Name:           SOODSMA, STEVEN J  
Address:        100 CAMELOT DRIVE  
City-St-Zip:    FOND DU LAC, WI 54935

Title:           VD  
Name:           SEIBEL, ANDREW P  
Address:        100 CAMELOT DRIVE  
City-St-Zip:    FOND DU LAC, WI 54935

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: STEVEN SOODSMA

CFO

03/31/2011

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

\_\_\_\_\_ Date