

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000517

FILED
Apr 20, 2009
Secretary of State

Entity Name: SAGE COLLECTIVE INC.

Current Principal Place of Business:

437 MADISON AVE
NEW YORK, NY 10022

New Principal Place of Business:

220 PONTE VEDRA PARK DRIVE, SUITE 200
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

437 MADISON AVE
NEW YORK, NY 10022

New Mailing Address:

5000 S TOWNE DR
NEW BERLIN, WI 53151

FEI Number: 72-1138865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: ZANGARA, DEBORAH
Address: 437 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

Title: P () Delete
Name: CONNELLY, CRAIG
Address: 5000 SOUTH TOWNE DR
City-St-Zip: NEW BERLIN, WI 53151

Title: D () Delete
Name: REYNOLDS, GARY
Address: 5000 SOUTH TOWNE DR
City-St-Zip: NEW BERLIN, WI 53151

Title: EVP () Delete
Name: CARPER, JENNIFER
Address: 165 PATRICK MILL CIRCLE
City-St-Zip: PONTE VEDRA, FL 32082

Title: CFO () Delete
Name: GERAGHTY, VIRGINIA
Address: 5000 SOUTN TOWNE DRIVE
City-St-Zip: NEW BERLIN, WI 53151

Title: AS () Delete
Name: RYAN, DAN
Address: 5000 SOUTH TOWNE DRIVE
City-St-Zip: NEW BERLIN, WI 53151

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: EVP (X) Change () Addition
Name: CARPER, JENNIFER
Address: 220 PONTE VEDRA PARK DRIVE, SUITE 200
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VIRGINIA GERAGHTY

CFO

04/20/2009

Electronic Signature of Signing Officer or Director

Date