


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90018 017 ***150.00

DOCUMENT # H03175

1. Entity Name
CAPE WINDS, INC.



Principal Place of Business
**710 N. PLANKINTON AVE.
 SUITE 1200
 MILWAUKEE, WI 53203 US**

Mailing Address
**710 N. PLANKINTON AVE.
 SUITE 1200
 MILWAUKEE, WI 53203 US**

2. Principal Place of Business
1000 Shorewood Drive

Suite, Apt. #, etc.
Suite 200

City & State
Cape Canaveral, FL

Zip
32920

Country
US

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

01122005 Chg-P CR2E034 (10/03)

4. FEI Number
39-1485729

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)


**FILE NOW!!! FEE IS \$150.00
 After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZILBER, JOSEPH J 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WIGCHERS, ARTHUR W 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV STEIN, GERALD M 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHEVALIER, STEPHAN J 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRV JANZ, JAMES F 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS YOUNG, JAMES B 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SEE ATTACHED LIST FOR ADDITIONAL OFFICERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Title should read: D/V
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **James B. Young, Vice President** **01/31/05 414-274-2421**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40018584

CAPE WINDS, INC.
DOCUMENT # H03175

Additional Officers:

FV
BRAUN, ROBERT E.
710 N. PLANKINTON AVE., SUITE #1000
MILWAUKEE, WI 53203

V
BENNETT, BRENDA C.
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

V
BORRIS, JAMES D.
710 N. PLANKINTON AVENUE, #1100
MILWAUKEE, WI 53203

V
GRANDLICH, JOHN R.
710 N. PLANKINTON AVE., SUITE #1100
MILWAUKEE, WI 53203

AS
DeLISLE, SANDRA J.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

AS
MADIGAN, MARK S.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203