

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 29, 2002 8:00 am**  
**Secretary of State**

04-29-2002 90058 021 \*\*\*150.00

**DOCUMENT # J33910**

1. Entity Name  
**TOWNE REALTY OF WEST FLORIDA, INC.**

Principal Place of Business <b>710 N PLANKINTON AVENUE          SUITE #1200          MILWAUKEE WI 53203          US</b>	Mailing Address <b>710 N PLANINTON AVENUE          SUITE #1200          MILWAUKEE WI 53203          US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number <b>39-1576894</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM          1200 S. PINE ISLAND ROAD          PLANTATION FL 33324</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>ZILBER, JOSEPH</b> <b>710 N. PLANKINTON</b> <b>MILWAUKEE WI</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>SEE ATTACHED LIST OF ADDITIONAL OFFICERS</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>P</b> <b>WIGCHERS, ARTHUR W. JR.</b> <b>710 N. PLANKINTON</b> <b>MILWAUKEE WI</b>	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"/> Delete <b>V</b> <b>BORRIS, JAMES D.</b> <b>710 N. PLANKINTON</b> <b>MILWAUKEE WI</b>	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"/> Delete <b>VS</b> <b>YOUNG, JAMES B.</b> <b>710 N. PLANKINTON</b> <b>MILWAUKEE WI</b>	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"/> Delete <b>FV</b> <b>BRAUN, ROBERT E.</b> <b>710 N. PLANKINTON</b> <b>MILWAUKEE WI</b>	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"/> Delete <b>AS</b> <b>MADIGAN, MARK S.</b> <b>710 N. PLANKINTON</b> <b>MILWAUKEE WI</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>V/AS</b>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mark S. Madigan **Mark S. Madigan**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Assistant Secretary 01/10/02 (414) 274-2433  
Date Daytime Phone #

CR2E034 (9/01)

Attachment

DOC # J33910 /

842180

TOWNE REALTY OF WEST FLORIDA, INC.  
DOCUMENT NO. J33910

OFFICERS:

V

ATCHLEY, ALAN  
GREENBROOK CROSSING  
13806 NIGHTHAWK TERRACE  
BRADENTON, FL 34202

V

GRANDLICH, JOHN R.  
710 NORTH PLANKINTON AVENUE, #1100  
MILWAUKEE, WI 53203

V

JANZ, JAMES F.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

V

KEARNEY, KITT E R.  
8430 ENTERPRISE CIRCLE, SUITE 130  
BRADENTON, FL 34202

V

STEIN, GERALD  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

T

CHEVALIER, STEPHAN J.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203

AS

DeLISLE, SANDRA J.  
710 NORTH PLANKINTON AVENUE, #1200  
MILWAUKEE, WI 53203