


2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

02-15-2005 90020 030 ***150.00

DOCUMENT # P02000113581	
1. Entity Name CAPE MANAGEMENT, INC.	

Principal Place of Business 710 NORTH PLANKINTON AVENUE SUITE 1200 MILWAUKEE, WI 53203	Mailing Address 710 NORTH PLANKINTON AVENUE SUITE 1200 MILWAUKEE, WI 53203
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2. Principal Place of Business 1000 Shorewood Drive	3. Mailing Address 710 N. Plankinton Avenue
Suite, Apt. #, etc. Suite 200	Suite, Apt. #, etc. Suite 1200
City & State Cape Canaveral, FL	City & State Milwaukee, WI
Zip 32920 Country US	Zip 53203 Country US

01122005 Chg-P CR2E034 (10/03)

4. FEI Number 48-1285259	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH 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
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZILBER, JOSEPH J 710 N. PLANKINTON AVENUE, SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	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	P BORRIS, JAMES D 710 N. PLANKINTON AVENUE, SUITE 1100 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANDREWS, SANDY 8968 CARIBE DRIVE CAPE CANAVERAL, FL 32920 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ANDREWS, SANDY 1000 SHOREWOOD DRIVE, #200 CAPE CANAVERAL, FL 32920
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GRANDLICH, JOHN R 710 N. PLANKINTON AVENUE, SUITE 1100 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JANZ, JAMES F 710 N. PLANKINTON AVENUE, SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S YOUNG, JAMES B 710 N. PLANKINTON AVENUE, SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	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)(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 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

ATTACHMENT

40018672

CAPE MANAGEMENT, INC.
DOCUMENT # P02000113581

Additional Officers:

V

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

V/AS

JARMUSZ, ANDREW P.
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

V

STEIN, GERALD M.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

V

WIGCHERS, ARTHUR W., JR.
710 N. PLANKINTON AVE., SUITE #1200
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