


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90006 039 ***150.00

| | | | | | |
|--|-----------------------------------|--|---|---|--|
| DOCUMENT # P98000079166 | | | |  | |
| 1. Entity Name TOWNE DEVELOPMENT OF TOWN CENTER, INC. | | | | | |
| Principal Place of Business 8430 ENTERPRISE CIRCLE SUITE 130 BRADENTON, FL 34202 | | | Mailing Address 710 N. PLANKINTON AVE., STE. 1200 MILWAUKEE, WI 53203 | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | Country | Zip | Country | 02012006 Chg-P CR2E034 (11/05) | |
| 4. FEI Number 39-1940591 | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 | | | 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE | D | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change | <input checked="" type="checkbox"/> Addition |
| NAME | ZILBER, JOSEPH J | | NAME | SEE ATTACHED LIST FOR ADDITIONAL OFFICERS | |
| STREET ADDRESS | 710 N. PLANKINTON AVE., STE. 1200 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MILWAUKEE, WI 53203 | | CITY-ST-ZIP | | |
| TITLE | EV | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME | STEIN, GERALD M | | NAME | | |
| STREET ADDRESS | 710 N. PLANKINTON AVE., STE. 1200 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MILWAUKEE, WI 53203 | | CITY-ST-ZIP | | |
| TITLE | V | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME | BRAUN, ROBERT E | | NAME | | |
| STREET ADDRESS | 710 N. PLANKINTON AVE., STE. 1000 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MILWAUKEE, WI 53203 | | CITY-ST-ZIP | | |
| TITLE | V/T | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME | CHEVALIER, STEPHAN J | | NAME | | |
| STREET ADDRESS | 710 N. PLANKINTON AVE., STE. 1200 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MILWAUKEE, WI 53203 | | CITY-ST-ZIP | | |
| TITLE | V/S | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME | YOUNG, JAMES B | | NAME | | |
| STREET ADDRESS | 710 N. PLANKINTON AVE., STE. 1200 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MILWAUKEE, WI 53203 | | CITY-ST-ZIP | | |
| TITLE | AS | <input type="checkbox"/> Delete | TITLE | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| NAME | DELISLE, SANDRA J | | NAME | | |
| STREET ADDRESS | 710 N. PLANKINTON AVE., STE. 1200 | | STREET ADDRESS | | |
| CITY-ST-ZIP | MILWAUKEE, WI 53203 | | CITY-ST-ZIP | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  | | | Mark S. Madigan, Vice President 02/27/06 414-274-2433 | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | | Date Daytime Phone # | | |

ATTACHMENT

40024212

TOWNE DEVELOPMENT OF TOWN CENTER, INC.

DOCUMENT #P98000079166

Additional Directors/Officers:

P

WIGCHERS, ARTHUR W.
710 N. PLANKINTON AVE., SUITE #1100
MILWAUKEE, WI 53203

V

BORRIS, JAMES D.
710 N. PLANKINTON AVE., SUITE #1100
MILWAUKEE, WI 53203

V

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

SRV

JANZ, JAMES F.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

V

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

V/AS

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