

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000000456

**Entity Name:** CONSTRUCTION FORMS, INC.

**Current Principal Place of Business:**

777 MARITIME DRIVE  
PORT WASHINGTON, WI 53074-0308

**Current Mailing Address:**

777 MARITIME DRIVE  
P.O. BOX 308  
PORT WASHINGTON, WI 53074-0308 US

**FEI Number:** 39-1104344

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ADLER, DEAN  
1060 WINDING WATER CIRCLE  
WINTER SPRINGS, FL 32708 US

*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

**Officer/Director Detail :**

Title: CEO  
Name: HAMILTON, THOMAS E  
Address: 777 MARITIME DRIVE  
P.O. BOX 308  
City-State-Zip: PORT WASHINGTON WI 53074

Title: CHAIRMAN  
Name: FINNERAN, WILLIAM B  
Address: 767 THIRD AVENUE, 16TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title: DIRECTOR  
Name: SCOTT, WILLIAM C  
Address: 445 PARK AVENUE SUITE 1905  
City-State-Zip: NEW YORK NY 10022

Title: CFO  
Name: SKEBBA, TERRY R  
Address: 777 MARITIME DRIVE  
P.O. BOX 308  
City-State-Zip: PORT WASHINGTON WI 53074

Title: DIRECTOR  
Name: FINNERAN, WILLIAM T  
Address: 777 MARITIME DRIVE  
P.O. BOX 308  
City-State-Zip: PORT WASHINGTON WI 53074-0308

*I hereby 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 all other like empowered.*

**SIGNATURE:** TERRY R SKEBBA

CFO

04/27/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date