

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002425

Entity Name: CMIC SPECIALTY SERVICES, INC.**Current Principal Place of Business:**3000 SCHUSTER LN
MERRILL, WI 54452**Current Mailing Address:**3000 SCHUSTER LN
MERRILL, WI 54452**FEI Number:** 20-3927225**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 PRESIDENT, DIRECTOR
Name POIRIER, RICHARD V.
Address 3000 SCHUSTER LANE
City-State-Zip: MERRILL WI 54452

Title SECRETARY
Name BRANDT, CYNTHIA M
Address 3000 SCHUSTER LN
City-State-Zip: MERRILL WI 54452

Title TREASURER
Name VANDENBERG, HERMAN
Address 3000 SCHUSTER LN
City-State-Zip: MERRILL WI 54452

Title DIRECTOR
Name LINDSAY, MARSHA A
Address 5603 TONYAWATHA TRAIL
City-State-Zip: MONONA WI 53716

Title DIRECTOR
Name RAVN, MICHAEL E.
Address 3000 SCHUSTER LN
City-State-Zip: MERRILL WI 54452

Title DIRECTOR
Name RILEY, MICHAEL J.
Address 431 PINWOOD LAKE DRIVE
City-State-Zip: VENICE FL 34285

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: HERMAN VANDENBERG

TREASURER

04/07/2016

Electronic Signature of Signing Officer/Director Detail_____
Date