

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 826930

FILED
Jan 14, 2009
Secretary of State

Entity Name: B.C. ZIEGLER AND COMPANY

Current Principal Place of Business:

215 NORTH MAIN STREET
WEST BEND, WI 53095

New Principal Place of Business:

200 SOUTH WACKER DRIVE, SUITE 2000
CHICAGO, IL 60606

Current Mailing Address:

200 SOUTH WACKER DRIVE, SUITE 2000
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 39-0727640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEMS
1200 S PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SMSD () Delete
Name: DEBERRY, BENJAMIN H
Address: 322 S CUYLER AVENUE
City-St-Zip: OAK PARK, IL 60302

Title: PD () Delete
Name: PAPROCKI, THOMAS R
Address: 420 E WATERSIDE STREET, UNIT 3214
City-St-Zip: CHICAGO, IL 60601

Title: SMD () Delete
Name: ENGLE, GARY P
Address: 2165 WEST HEMLOCK ROAD
City-St-Zip: GLENDALE, WI 53209

Title: SM () Delete
Name: CARLSON, DONALD A JR
Address: 290 VINE AVENUE
City-St-Zip: LAKE FOREST, IL 60045

Title: CFOD () Delete
Name: VREDENBREGT, JEFFREY C
Address: 2826 W GRACE AVE
City-St-Zip: MEQUON, WI 53092

Title: CEOD () Delete
Name: MULHERIN, JOHN J
Address: 5587 E WATERFORD
City-St-Zip: HARTFORD, WI 53027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BENJAMINE H DEBERRY

SMSD

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date