FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

HARNIS	MENT # 827337 CHFEGER CORPORATION Set of Business Set AME							
P.O. BOX 554 P.O. BOX 554								
MILWAUKEE V	WI 53201	MILWAUKEE WI 53201-05	54		3. Date Incorporated or Qualified	3a. Date of L	ast Report	
					01/19/1972	04/30/19		
L	Prace of Business	2s. Mailing Address			4. FEI Number Applied F		or	
L	W. NATIONAL AVE.	26 3600 S. LA	KE DRIV	/E	39-0334430 Not Applicat			
Suite Aut	# ORC	Suite, Apt #, etc. 27 LEGAL DEPT			5. Certificate of Status Desired		. 75 Addition ee Required	al
City & Stat	le	City & State			6. Election Campaign Financing		.00 May Be	
23 MILWA	3 MILWAUKEE WI 28 ST. FRA				Trust Fund Contribution		ded to Fees	
7 _{(p}	Country Z _I p		Countr	•	· · ·	8. This corporation has liability for intangible tax under s. 199.032,		
24 53201 25 USA		29 53235-3716 30 USA			Florida Statutes Yes K No 10. Name and Address of New Registered Agent			
	9. Name and Address of Curren	nt Hegistered Agent	81	Name	10. Name and Address of New Ro	gistered Agent		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD							····	
PLANTATION FL 33324			82	2 Street A	Address (P.O. Box Number is Not Accepta	ble)		ļ
	WINTER TO THE		83	3				
}			84	1 City		85	Zip Code	
			1	1 -			•	
office or agent 1: SIGNATURE	States as typical or print of name of registered ag	(NO			corporation submits this statement for the poration's board of directors. I hereby access required when reinstating)	DATE		
12.	Control of the Contro	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFE			
TITLE	PD HALE DODGOT W	☐ DELETE 1.1		Į.		Ch	iange 🔲 Ad	1 7
NAME STREET ADDRESS	HALE, ROBERT W 4400 W NATIONAL AVE		1.2 NAME	T ADDRESS				10010
City - ST- 7IP	W MILWAUKEE WI		1.3 STREE					L
THEF	ASQ	DELETE	2.1 TrTLE		ASQ	K Ch	iange A	
NAME	FONSTAD, ERIC B.		2.2 NAME		FONSTAD, ERIC B.			Ì
STREET ADDRESS	40450 01011000 1 11100		2 3 STREE	T ADDRESS	3600 S. LAKE DRIVE			1
CHY SI-ZIF	BROOKFIELD, WS		2 4 CITY	-ST-ZIP	ST. FRANCIS WI 53235			
THUE	DC	DELETE 3.1 T			DC	K .) Ch	ange []] Ad	ddilion
NAME	GRADE, J.T.	32		- 1	GRADE, JEFFERY T.			
STREET LADORESS				ET ADDRESS	3600 S. LAKE DRIVE ST. FRANCIS WI 53235	-3716		
CHY-SI-ZiP THEE	BROOKFIELD WI SVPD	DELETE	3.4. CITY- 4.1 TITLE		SVPD	-3/10 -3 /10	nange 🔲 Ad	ddition
NAME	CORBY, FRANCIS M.		4 2 NAM		CORBY, FRANCIS M., JR.		J	
STREET ADDRESS				ET ADDRESS	3600 S. LAKE DRIVE	•		}
Ú-TY - ST - ZiP	BROOKSFIELD WI		44 CITY-	ST-ZIP	ST. FRANCIS WI 53235	-3716		
7016	V	☐ DELETE	5.1 TITLE		VP	★ Ch	ange 🔲 Ar	ddition
NAME	+ + - + - + - + - +		5.2 NAME		FUHRMANN, EUGENE			1
STREET ADDRESS	DOG OVERE DAM			ET ADDRESS	4400 W. NATIONAL AVENU	JE		1
CHY-ST ZIP	BROOKFIELD WI	DE1171	5 4 CITY-		MILWAUKEE WI 53214	1 70	1000 A	ddition
THEF	I AMPREDT IAN	☐ DELETE	61 TITLE		AT	★ Cr	orige LJA(unition
NAME STREET ADORESS	LAMBERT, IAN 13400 BISHOPS LANE		6.2 NAME	: Et address	STARK, KENNETH J.			1
CHY-S1-7IP	BROOKFIELD WI		6.4 CITY-		3600 S. LAKE DRIVE ST. FRANCIS WI 53235	-2716		}
Q11 7 1 27 1 1 1 1	1		0.7 0111		NY TANDHULD MT 33733.			

14. Loo 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 12 or Block 13 if changed, or local an attachment with an address.

SIGNATURE:

THE AMOST LEET OR PRIVILED WINES OF SOMING OFFICER OF DIRECTOR

APRIL 8, 1997

(414)486-6434

FILED

Apr 17 1997 8:00am

Secretary of State

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