

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004849

FILED
Jan 13, 2005
Secretary of State

Entity Name: HIDDEN CREEK FARM, INC.

Current Principal Place of Business:

9667 SOUTH 20TH STREET
OAK CREEK, WI 53154

New Principal Place of Business:

Current Mailing Address:

9667 SOUTH 20TH STREET
OAK CREEK, WI 53154

New Mailing Address:

FEI Number: 39-1734710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ENGLE, MARGIE
2126 HENLEY PLACE
WEST PALM BEACH, FL 33414 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: PTD () Delete
Name: POLASKI, MICHAEL H
Address: 9667 SOUTH 20TH STREET
City-St-Zip: OAK CREEK, WI 53154

Title: SVP () Delete
Name: POLASKI, CATHERINE J
Address: 9667 SOUTH 20TH STREET
City-St-Zip: OAK CREEK, WI 53154

Title: AS () Delete
Name: NICHOLS, THOMAS J ESQ
Address: 111 E KILBOURN AVE 19TH FL
City-St-Zip: MILWAUKEE, WI 532026622

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL H. POLASKI

PTD

01/13/2005

Electronic Signature of Signing Officer or Director

Date