

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000196

Entity Name: H.C. MILLER COMPANY

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

3030 LOWELL DRIVE
GREEN BAY, WI 54311

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10447
GREEN BAY, WI 543070447

New Mailing Address:

FEI Number: 39-1998962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 323010000 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: P () Delete
Name: HAYES, WILLIAM T
Address: 1606 NEW PLANK ROAD
City-St-Zip: DEPERE, WI 54115

Title: VCEO () Delete
Name: SCHAEFER, MICHAEL R
Address: 1720 RIVER MILL ROAD
City-St-Zip: OSHKOS, WI 54901

Title: SCOO () Delete
Name: DEMSKE, RONALD N
Address: 2311 SCHOOL ROAD
City-St-Zip: GREENLEAF, WI 54126

Title: CD () Delete
Name: HAYES, WILLIAM T II
Address: 1606 NEW PLANK ROAD
City-St-Zip: DEPERE, WI 54115

Title: D () Delete
Name: SCHREIBER, ROGER
Address: 1853 OVERVIEW DRIVE N.E.
City-St-Zip: TACOMA, WA 98422

Title: D () Delete
Name: MARTIN, CHUCK
Address: 930 GODDARD WAY
City-St-Zip: GREEN BAY, WI 54311

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
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: WILLIAM T. HAYES II

P

04/28/2004

Electronic Signature of Signing Officer or Director

Date