2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000444

Entity Name: WISCONSIN-MANKIND PROJECT, INC.

FILED Jan 17, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
WEST ALLIS, WI 53214				8989 N PORT WASHINGTON ROAD #227 MILWAUKEE, WI 53217 US			
Current Mailing Address:				New Mailing Address:			
P.O.BOX 14246 WEST ALLIS, WI 532140246				8989 N PORT WASHINGTON RD #227 MILWAUKEE, WI 53217 US			
FEI Number:	39-1712307	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate of Status Des	sired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
DWORKIN, ED 217 KENTUCKY BLUE CIR APOPKA, FL 32712 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,							
in the State							
SIGNATUR		Signature of Registered Agent				 Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () C LITZAU, ROBERT 5816 N 37TH ST MILWAUKEE, WI			Title: Name: Address: City-St-Zip:	P (X) LITZAU, ROBER 5816 N 37TH ST MILWAUKEE, W	Γ	
Title: Name: Address: City-St-Zip:	V () E BEHLKE, RICK L W4535 COUNTR' EDEN, WI 53019			Title: Name: Address: City-St-Zip:	S (X) COSTELLO, PA 2300 S LAWE S APPLETON, WI	STREET	
Title: Name: Address: City-St-Zip:	P () E NILAND, SEAN 2932 ALGOMA S' STEVENS PT, WI			Title: Name: Address: City-St-Zip:	D (X) PELLINEN, JOH 726 S STATE ST APPLETON, WI	TREET	
Title: Name: Address: City-St-Zip:	T () C SZPER, DOUG N1811 KNORR R RANDOM LAKE, V			Title: Name: Address: City-St-Zip:	T (X) SZPER, DOUGL N1811 KNORR I RANDOM LAKE	RD	
Title: Name: Address: City-St-Zip:	D () E WOEHLER, ROB 5883 INVERNESS ROCKFORD, IL	S DR		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () E RUSECKI, KEITH 7820 21ST AVE KENOSHA, WI 5			Title: Name: Address: City-St-Zip:	D (X) MCGRADY, TIM 1524 GRANGE A RACINE, WI 53	AVENUE	

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: DOUGLAS A. SZPER T 01/17/2008