

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000444

FILED
Jan 03, 2011
Secretary of State

Entity Name: WISCONSIN-MANKIND PROJECT, INC.

Current Principal Place of Business:

8989 N PORT WASHINGTON ROAD
#227
MILWAUKEE, WI 53217 US

New Principal Place of Business:

Current Mailing Address:

8989 N PORT WASHINGTON RD
#227
MILWAUKEE, WI 53217 US

New Mailing Address:

FEI Number: 39-1712307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DWORKIN, ED
217 KENTUCKY BLUE CIR
APOPKA, FL 32712 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

OFFICERS AND DIRECTORS:

Title: P
Name: GIESE, MICHAEL
Address: 6912 COUNTY ROAD T
City-St-Zip: OSHKOSH, WI 54904 US

Title: S
Name: NEMICK, JOHN
Address: 220 ROSELAWN BLVD
City-St-Zip: GREEN BAY, WI 54301 US

Title: D
Name: BURBACH, JOEL
Address: N 1294 HWY F
City-St-Zip: MONTELO, WI 53949

Title: T
Name: SZPER, DOUGLAS A
Address: N1811 KNORR RD
City-St-Zip: RANDOM LAKE, WI 53075

Title: D
Name: WINDANCER, DAKOTA
Address: 127 MARIA LANE
City-St-Zip: COTTAGE GROVE, WI 53527 US

Title: D
Name: KERR, BARRY
Address: 319 SETH CIRCLE
City-St-Zip: MADISON, WI 53716 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUGLAS A. SZPER

T

01/03/2011

Electronic Signature of Signing Officer or Director

Date