

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003645

FILED  
Feb 27, 2009  
Secretary of State

Entity Name: WISCONSIN MILK MARKETING BOARD, INC.

## Current Principal Place of Business:

8418 EXCELSIOR DR  
MADISON, WI 53717

## New Principal Place of Business:

## Current Mailing Address:

8418 EXCELSIOR DR  
MADISON, WI 53717

## New Mailing Address:

FEI Number: 39-1455990

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C ( ) Delete  
Name: STAUFFACHER, JAY  
Address: 16323 MEYLOR LN  
City-St-Zip: DARLINGTON, WI 53530

Title: VC ( ) Delete  
Name: SEEFELDT, CONNIE  
Address: N1554 BEHNKE RD  
City-St-Zip: COLEMAN, WI 54112

Title: P ( ) Delete  
Name: ROBSON, JAMES  
Address: 8418 EXCELSIOR DR  
City-St-Zip: MADISON, WI 53717

Title: S ( ) Delete  
Name: CIHLAR, SANDI  
Address: 1075 TOWN HALL RD  
City-St-Zip: MOSINEE, WI 54455

Title: T ( ) Delete  
Name: WUBBENHORST, JUDY  
Address: E7999 EAST SMITH RD  
City-St-Zip: WESTBY, WI 54667

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: ROBSON, JAMES H  
Address: 8418 EXCELSIOR DR  
City-St-Zip: MADISON, WI 53717

Title: S (X) Change ( ) Addition  
Name: JASURDA, ED  
Address: N7822 MURPHY LAKE RD  
City-St-Zip: PHILLIPS, WI 54555

Title: T (X) Change ( ) Addition  
Name: AVERBECK, MONA  
Address: N8150 TOWNLINE RD  
City-St-Zip: FOND DU LAC, WI 54937

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

SIGNATURE: JAMES H. ROBSON

P

02/27/2009

Electronic Signature of Signing Officer or Director

Date