

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004274

FILED  
Jan 08, 2010  
Secretary of State

**Entity Name:** WISCONSIN LUTHERAN COLLEGE, INC.

**Current Principal Place of Business:**

8800 W. BLUEMOUND RD.  
MILWAUKEE, WI 53226

**New Principal Place of Business:**

**Current Mailing Address:**

8800 W. BLUEMOUND RD.  
MILWAUKEE, WI 53226

**New Mailing Address:**

**FEI Number:** 23-7179639

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WHITE, RONALD E PH.D  
C/O FOSTER ASSOCIATES INC.  
17595 S. TAMiami TRAIL, SUITE 212  
FORT MYERS, FL 33908 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  
**Name:** DRSKA, GARY A  
**Address:** W208 S10647 KAREN COURT  
**City-St-Zip:** MUSKEGO, WI 53150

**Title:** VC  
**Name:** TREFFERT, WILLIAM  
**Address:** W283 N3820 YORKSHIRE TRACE  
**City-St-Zip:** PEWAUKEE, WI 53072

**Title:** TD  
**Name:** RAABE, KENT A  
**Address:** 1080 HAWTHORNE RIDGE DRIVE  
**City-St-Zip:** BROOKFIELD, WI 53045

**Title:** SD  
**Name:** WRIGHTSMAN, MARK A  
**Address:** 4299 N MCDONALD DRIVE  
**City-St-Zip:** STILLWATER, MN 55082

**Title:** P  
**Name:** JOHNSON, DANIEL W  
**Address:** N99 W14488 AMBER DR  
**City-St-Zip:** GERMANTOWN, WI 53022

**Title:** V  
**Name:** SCHLOMER, DUANE R  
**Address:** 2461 N 72ND ST.  
**City-St-Zip:** WAUWATOSA, WI 53213

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:** DUANE R. SCHLOMER

V

01/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date