

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000001605

Entity Name: ALL AMERICAN OF WI, INC.

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1490 N BELCHER  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

300 CHAFFEE RD  
OCONOMOWOC, WI 53066

**New Mailing Address:**

FEI Number: 39-1812719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLEMAN, CAROL  
1490 N BELCHER  
CLEARWATER, FL 33765 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: CDPT  
Name: MEINHOLZ, DANIEL  
Address: 34730 BARTLETT ROAD  
City-St-Zip: OCONOMOWOC, WI 53066

Title: DVPS  
Name: MEINHOLZ, AMY  
Address: 1490 N BELCHER  
City-St-Zip: CLEARWATER, FL 33765

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

SIGNATURE: DAN MEINHOLZ

PRES

01/19/2011

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

\_\_\_\_\_  
Date