FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F34404 1. Corporation Name

SUNCOAST GROUP LTD., INC.

Principal Place of Business		Mailing Address		I INDIANA TION AIRI AIRI AIRI ANNI AIRI AIRI AIRI	91011 B1011 01011 01	, Til g(81) 1981	
		710 N PLANKINTON AVE					
MILWAUKEE WI 53203-2404 MILWAUKEE WI 53203-2404		MILWAUKEE WI 53203-2404			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	J OF ACL	
					05/12/1981		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
24 7 Miloipai 1	acc of Business	26			39-1385826	<u> </u>	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc				\$8.75-A	dditional
22		27			5. Certifcate of Status Desired	Fee Red	auired
City & Stat	е	City & State			6. Election Campaign Financing	\$5.00 1	мау Ве
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	_ Country	'	8. This corporation owes the current year In		r=1
24	25	29 30	<u>) </u>		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered	Agent	
CT C	ORPORATION SYSTEM		<u> </u>				
	S. PINE ISLAND ROAD		82	Street A	Address (P.O. Box Number is Not Acceptable)		
	VITATION FL 33324		83				_
	f: 5						
	等的"好"多度。 第二		84	City	F	85 Zip C	ode
11 Dureupht	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above	e-named o	corporation submits this statement for the purpose of	f changing its	registered
office or r agent. I a	egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was auth	iorized by	the corpo	oration's board of directors. I hereby accept the appropriate	ointment as reg	istered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re	gistered Age	nt signature re	equired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE			1.1 TITLE		V	☐ Change	Addition
NAME	ZILBER, JOSEPH J.		1.2 NAME		BRAUN, ROBERT E.		
STREET ADDRESS			1.3 STREE	TADDRESS	710 N. PLANKINTON AVENUE, #1200		
CITY-ST-ZIP					MILWAUKEE, WI 53203	Clobanan	Addition
TITLE	_		2.1 TITLE		V	☐ Change	Addition
NAME	STEIN, GERALD		2.2 NAME		GRANDLICH, JOHN R.		
STREET ADDRESS	-710 N. PLANKINTON AVE.			T ADORESS	710 N. PLANKINTON AVENUE, #1200		
CITY-ST-ZIP			2. 4 CITY - S 3.1 TITLE	ST-ZIP	MILWAUKEE, WI_53203	Change	∑ Addition
TITLE	PODDIE MATE D	□ betere	3.1 HILE		TR		(2)
NAME	BORRIS, JAMES D			TADDRESS	CHEVALIER, STEPHAN J.		
STREET ADDRESS	710 N PLANKINTON AVE MILWAUKEE WI		3.4. CITY-S		710 N. PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203		
CITY-ST-ZIP TITLE	ANTANADUEC AAI	☐ DELETE	4.1 TITLE	31-ZIF	AS	Change	Addition
NAME	WIGCHERS, ARTHUR W., JR.	_	4. 2 NAME		SANDRA J. DELISLE		•
STREET ADDRESS	710 N. PLANKINTON AVE.			T ADDRESS	710 N. PLANKINTON AVENUE, #1200		
	MILWAUKEE WI		4.4 CITY-S		MILWAUKEE, WI 53203		i
CITY-ST-ZIP	V	☐ DELETE	5.1 TITLE	71-28	AS	Change	Addition
NAME	JANZ, JAMES F	_	5.2 NAME		MADIGAN, MARK S.		
STREET ADDRESS	710 N. PLANKINTON AVE.		5.3 STREE	TADORESS	710 N. PLANKINTON AVENUE, #1200		
CITY-ST-ZIP	MILWAUKEE WI		5.4 CITY-S	T-ZIP	MILWAUKEE, WI 53203		
TITLE	VS comments	☐ DELETE	6.1 TITLE			☐ Change	☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

YOUNG, JAMES B

MILWAUKEE WI

STREET ADDRESS

CITY-ST-ZIP

710 N. PLANKINTON AVE.

Mark S. Madigan

(414) 274-2433 Assistant Secretary 1/18/99

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90144 037 ***150.00