

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

FILED  
Mar 03, 1999 8:00 am  
Secretary of State

03-03-1999 90114 034 \*\*\*150.00

DOCUMENT # F94000004388

1. Corporation Name

GB ELECTRICAL, INC.

Principal Place of Business

6101 N. BAKER ROAD  
GLENDALE WI 53209  
US

Mailing Address

P.O. BOX 325  
MILWAUKEE WI 53201

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/24/1994

4. FEI Number

39-0964876

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE  
NAME LECHER, THEODORE M  
STREET ADDRESS 6101 N. BAKER RD.  
CITY-ST-ZIP GLENDALE WI 53209

TITLE V ☐ DELETE  
NAME ARZBAECHER, ROBERT C  
STREET ADDRESS 1300 W. SILVER SPRING DR.  
CITY-ST-ZIP BUTLER WI 53007

TITLE D ☐ DELETE  
NAME SIM, RICHARD G  
STREET ADDRESS 13000 W. SILVER SPRING DR.  
CITY-ST-ZIP BUTLER WI 53007

TITLE VPF ☐ DELETE  
NAME LAMPEREUR, ANDREW  
STREET ADDRESS 6101 N BAKER RD  
CITY-ST-ZIP GLENDALE WI 53209

TITLE TD ☐ DELETE  
NAME ASMUTH III, ANTHONY W.  
STREET ADDRESS 411 E. WISCONSIN AVE., SUITE 2550  
CITY-ST-ZIP MILWAUKEE WI

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition  
1.2 NAME BOEL, GWYS W.  
1.3 STREET ADDRESS 6101 N BAKER RD  
1.4 CITY-ST-ZIP GLENDALE WI 53209

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE T ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE SD ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT C. ARZBAECHER 2-15-99

Date

414 783-9279

Daytime Phone #

CR2E034 (11/98)