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FILED

Jan 30 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000003056 (7)

1. Corporation Name

THE ZIMMERMAN DESIGN GROUP, INC.

Principal Place of Business

7707 HARWOOD AVENUE  
MILWAUKEE WI 53213

Mailing Address

7707 HARWOOD AVENUE  
MILWAUKEE WI 53213-2610



3. Date Incorporated or Qualified

06/23/1995

3a. Date of Last Report

01/30/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

39-1101911

Applied For

Not Applicable

22 City & State

23 Zip

Country

27 City & State

28 Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fees Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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 ZIMMERMAN, GARY V  
STREET ADDRESS 7707 HARWOOD AVENUE  
CITY-ST-ZIP MILWAUKEE WI

TITLE D ☒ DELETE  
NAME CHRISTIANSON, MARVIN V  
STREET ADDRESS 7707 HARWOOD AVENUE  
CITY-ST-ZIP MILWAUKEE WI

TITLE TD ☐ DELETE  
NAME KORNITZ, BRUCE W  
STREET ADDRESS 7707 HARWOOD AVENUE  
CITY-ST-ZIP MILWAUKEE WI

TITLE V ☐ DELETE  
NAME SMITH, DONALD R  
STREET ADDRESS 7707 HARWOOD AVENUE  
CITY-ST-ZIP MILWAUKEE WI

TITLE S ☐ DELETE  
NAME POWELL, JOANN  
STREET ADDRESS 7707 HARWOOD AVENUE  
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 ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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 ☐ Change ☒ Addition  
4.2 NAME Director  
4.3 STREET ADDRESS Donald R. Smith  
4.4 CITY-ST-ZIP 7707 Harwood Avenue  
Milwaukee, WI 53213

5.1 TITLE ☐ 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 do 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 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bruce W. Kornitz, VP 1/7/97 414 476 9500

Date

Daytime Phone

CR2E034 (9/96)