2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2004
Secretary of State

DOCUMENT# F96000001971

Entity Name: SII INVESTMENTS, INC

Current Principal Place of Business:

5555 GRANDE MARKET DR
APPLETON, WI 54913

New Principal Place of Business:

Current Mailing Address:

P O BOX 5097
APPLETON, WI 549125097 US

New Mailing Address:

FEI Number: 39-1099262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAVRIDES, STEPHEN
1451 W CYPRESS CREEK ROAD
SUITE 300
FORT LAUDERDALE, FL 33309

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PCEO	( ) Delete
Name:	JOHNSON, PETER M	
Address:	5555 GRANDE MARKET DR	
City-St-Zip:	APPLETON, WI 54913	
Title:	SVCS	( ) Delete
Name:	MILLER, JAMES P	
Address:	5555 GRANDE MARKET DR	
City-St-Zip:	APPLETON, WI 54913	
Title:	D	( ) Delete
Name:	WELLS, MIKE	
Address:	1 CORPORATE WAY	
City-St-Zip:	LANSING, MI 48951	
Title:	D	( ) Delete
Name:	SIMON, JIM	
Address:	1 CORPORATE WAY	
City-St-Zip:	LANSING, MI 48951	
Title:	D	( ) Delete
Name:	HOPPING, ANDY	
Address:	1 CORPORATE WAY	
City-St-Zip:	LANSING, MI 48951	
Title:	D	( ) Delete
Name:	CLIFFORD, JACK	
Address:	1 CORPORATE WAY	
City-St-Zip:	LANSING, MI 48951	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PETE JOHNSON PCEO 01/14/2004

Electronic Signature of Signing Officer or Director — Date