2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2007
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:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PCEO	( ) Delete
Name:	MILLER, JAMES P	
Address:	5555 GRANDE MARKET DR	
City-St-Zip:	APPLETON, WI 54913	
Title:	SVP	( ) Delete
Name:	KINART, TODD A	
Address:	5555 GRANDE MARKET DR	
City-St-Zip:	APPLETON, WI 54913	
Title:	D	( ) Delete
Name:	MILLER, JAMES P	
Address:	5555 GRANDE MARKET DRIVE	
City-St-Zip:	APPLETON, WI 54913	
Title:	D	( ) Delete
Name:	DREFFEIN, M. SHAWN	
Address:	401 WILSHIRE BLVD, SUITE 1100	
City-St-Zip:	SANTA MONICA, CA 90401	
Title:	D	( ) Delete
Name:	THOMAS, MEYER	
Address:	1 CORPORATE WAY	
City-St-Zip:	LANSING, MI 48951	
Title:	CFO	( ) Delete
Name:	COLLINS, MAURA	
Address:	401 WILSHIRE BLVD, SUITE 1100	
City-St-Zip:	SANTA MONICA, CA 90401	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SVP	(X) Change ( ) Addition
Name:	KINART, TODD M	
Address:	5555 GRANDE MARKET DR	
City-St-Zip:	APPLETON, WI 54913	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	MEYER, THOMAS J	
Address:	1 CORPORATE WAY	
City-St-Zip:	LANSING, MI 48951	
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 Chapter 119, 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: JAMES P. MILLER PCEO 02/23/2007

Electronic Signature of Signing Officer or Director Date