

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000006892

1. Entity Name

LANG FOLK ART COLLECTION, LTD., CO.

f

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90019 017 ***150.00

Principal Place of Business

PO BOX 99
 DELAFIELD WI 53018

Mailing Address

PO BOX 99
 DELAFIELD WI 53018

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

39-1780429

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00 ^{150.00}
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	LANG, ROBERT A	
STREET ADDRESS	830 N. SAWYER RD.	
CITY-ST-ZIP	OCONOMOWOC WI 53066	
TITLE	SD	<input type="checkbox"/> Delete
NAME	LANG, N. SUSANNE	
STREET ADDRESS	830 N. SAWYER RD.	
CITY-ST-ZIP	OCONOMOWOC WI 53066	
TITLE	V	<input type="checkbox"/> Delete
NAME	CERA, ROBERT J	
STREET ADDRESS	W301 N3226 WINDRUSH CIRCLE	
CITY-ST-ZIP	PEWAUKEE WI 53072	
TITLE	V	<input type="checkbox"/> Delete
NAME	TRUNZO, ROBERT N	
STREET ADDRESS	1044 WILLOW DRIVE	
CITY-ST-ZIP	DELAFIELD WI 53018	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	SCHALL, JAMES L	
STREET ADDRESS	W303 N3145 TIMBERLINE CT	
CITY-ST-ZIP	PEWAUKEE WI 53072	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert A. Lang
REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JUL 19 2000

THE LANG COMPANIES™

POST OFFICE BOX 99-DELAFIELD, WI 53018

ATTACHMENT
~~F96000009687~~
F96000006892
A0068363

July 14, 2000

Division of Corporations
Uniform Business Report Filings
P O Box 1500
Tallahassee, FL 32302-1500

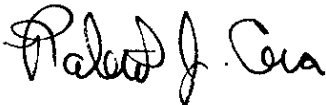
Dear Sir or Madam:

Enclosed please find the second notice of the 2000 Uniform Business Report, along with our check in the amount of \$150.00. Pursuant to my telephone conversation with your office on July 13, 2000, I am including this letter to inform you that I did not receive the original preprinted form prior to May 1, 2000.

Further be advised that I have reviewed our 1999 files and note that a fee of \$400.00 was paid on May 1, 1999. As we also did not receive the original, preprinted form last year, I am requesting a refund of the \$400.00 late fee for 1999.

If you have any questions, or need any further information, please contact our Controller, Tim Toepel.

Very truly yours,



Robert J. Cera
Chief Financial Officer

RJC:jm

Faint, illegible text, possibly a stamp or bleed-through from the reverse side of the page.