FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90236 013 ***150.00

1999

DOCUMENT # F9700002414

1. Corporat on Name

Principal Place of Business

FREEDOM PLASTICS, INC. - FLORIDA

3206 ENTERPRISE RD FT. PIERCE FL 34982 US		100 E. WISCONSIN AVE STE. 3300 MILWAUKEE WI 53202					RITE IN THIS	SPACE	Ē				
						3. Date In 05/06 ,	corporated or Qualif 1997	ed 					
2. Principal P	lace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Nu			$ \lfloor$	Apr	ed For		
21		26				39-18	89081				.\pplicable		
Suite, Art.	#, etc.	Suite, Apt. #, etc.			5. Certifca	ite of Status Desired				dditional			
22		27						Fe	ee Rec	quired			
City & State	e	City & State			l l	6. Election Campaign Financing \$5.00 Nay Be Trust Fund Contribution Added to Fees							
23		28					und Contribution			ded to	Fees		
Zip				ntry			8. This co poration owes the current year Into				tangible ☐Yes []No		
24	25	29					Personal Property Tax. 10. Name and Address of New Registered						
	9. Name and Address of Current	Registered Agent		81	Name	10. Name	ina Address of Ne	w registered	Agent				
CTI	CORPORATION SYSTEM			۱'	INATITE								
	SOUTH PINE ISLAND ROAD		82 Street Ad			Address (P.O. Box	Number is Not Acce	eptable)					
	ITATION FL 33324			83									
				84	City				85	Zip C	cde		
44 5	to the provisions of Se tions 607.0502	and 607 1509 Florida Statu	tae the ak		a-named c	connection submit	this statement for		changir	na its	re gistered		
office or re	egistered agent, or bot i, in the State of familiar with, and accept the obligation	il Florida. Such change was a	authorized	by 1	the corpo	ra ion's board of d	rectors. I hereby ac	cept the appoi	ntment	as reg	istered		
SIGNATURIE								DATE					
				Registered Agent signature required 13.		ADDITIO	NS/CHANGES TO	D-11.2	NO DIRE	-CTO	R S IN 12		
12.	CD OFFICERS AND	DELETE	1.1 TIT			ADDITIO	NO/OFFITTOLO TO	OI I IOLINO I I	☐ Cha		Addition		
	BORDEN, J. MICHAEL		1.2 NAME							ŭ	_		
NAME	2101 KENNEDY RD.		1.3 STREET AL		r ADDDEGG								
STREET ADDRESS	JANESVILLE WI 53547		1.4 CITY-ST-										
CITY-ST-ZIP TITLE	DS	☐ DELETE	2.1 TIT		-217				Cha	ange	Addition		
	SCOTT, FRANK	23 0000.0	2.2 NA						_	•			
NAME	2101 KENNEDY RD.		2.3 STREET		CADDRESS								
STREET ADDRESS	JANESVILLE WI 53547		2.4 CITY)						1		
CITY-ST-ZIP TITLE				31 TITLE					Cha	ange	Addition		
NAME	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3.2 NA										
STREET ADDRESS	215 SOUTH ARCH			3.3 STREET ADDRESS									
CITY-ST-ZIP	JANESVILLE WI 53547-1480		3.4. CITY-ST-ZIP										
TITLE	OP			TITLE			-		Cha	ange	Addition		
NAME	SCACCIA, STEPHEN E		4. 2 NA	ME									
STREET ADDRESS	215 SOUTH ARCH				ADDRESS								
CITY-ST-ZIP	JANESVILLE WI 53547-1480		4.4 CITY-		i								
TITLE	V	DELETE	5.1 TIT						Cha	ange	Addition		
NAME	COLEMAN, WILLIAM		5.2 NA	ME									
STREET ADDRESS	215 SOUTH ARCH		5.3 ST	REET	T ADDRESS								
CITY-ST-ZIP	JANESVILLE WI 53547-1480		5.4 CIT	.4 CITY-ST-ZIP									
TITLE	V		6.1 TIT	lΕ					Cha	ange	Addition		
NAME	PALASINI, MARC 62		6.2 NA	ME									

CITY-ST-ZIP 1 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 changes, or on an attachment with an address, with at other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS 215 SOUTH ARCH

JANESVILLE WI 53547-1480

<u>561-465-12</u>22