

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

**FILED**  
**May 11, 1999 8:00 am**  
**Secretary of State**

05-11-1999 90031 021 \*\*\*150.00

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # F98000001911**

1. Corporation Name

**BRADLEY FIXTURES CORPORATION**

Principal Place of Business  
**W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**

Mailing Address  
**W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**04/02/1998**

4. FEI Number

**39-1916030**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **CCEO**  
STREET ADDRESS **MULLETT, DONALD H**  
CITY-ST-ZIP **W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **PCO**  
STREET ADDRESS **CARROLL, JAMES E**  
CITY-ST-ZIP **W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **SVST**  
STREET ADDRESS **KLECZKA, JOHN C III**  
CITY-ST-ZIP **W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **V**  
STREET ADDRESS **STUCKEY, PHILIP L**  
CITY-ST-ZIP **W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **V**  
STREET ADDRESS **TREMLET, ROBERT S**  
CITY-ST-ZIP **W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME **V**  
STREET ADDRESS **WANDSCHNEIDER, JOHN F**  
CITY-ST-ZIP **W142 N9101 FOUNTAIN BLVD.  
MENOMONEE FALLS WI 53051**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/28/99**

**(414)251-6000**

CR2E034 (11/98)

# Bradley Fixtures Corporation Officers Listing

| <u>Title</u>   | <u>Name</u>           | <u>Business Address</u>                                | <u>Residence Address</u>                                 | <u>SS #</u> |
|--|-----------------------|--|--|-------------|
| Chairman &<br>Chief Executive Officer                  | Donald H. Mullett     | W142 N9101 Fountain Blvd.<br>Menomonee Falls, WI 53051 | N57 W30850 Lakewood Drive<br>Hartland, WI 53029          | 395-38-1514 |
| President &<br>Chief Operating Officer                 | James E. Carroll      | W142 N9101 Fountain Blvd.<br>Menomonee Falls, WI 53051 | 1685 Sunset Drive<br>Elm Grove, WI 53211                 | 568-66-6267 |
| Sr. Vice President Finance,<br>Secretary and Treasurer | John C. Kleczka, III  | W142 N9101 Fountain Blvd.<br>Menomonee Falls, WI 53051 | 855 Foxkirk Drive<br>Brookfield, WI 53045                | 398-40-3712 |
| Vice President - Operations                            | Philip L. Stuckey     | W142 N9101 Fountain Blvd.<br>Menomonee Falls, WI 53051 | 7225 W. Lafayette Place<br>Mequon, WI 53092              | 388-56-8125 |
| Vice President Management<br>Information Technology    | Robert S. Tremlett    | W142 N9101 Fountain Blvd.<br>Menomonee Falls, WI 53051 | 11331 North Riverland Rd.<br>Mequon, WI 53092            | 413-74-1539 |
| Vice President Corporate<br>Human Relations            | John F. Wandschneider | W142 N9101 Fountain Blvd.<br>Menomonee Falls, WI 53051 | W146 N6565 Cedar Ridge Lane<br>Menomonee Falls, WI 53051 | 391-40-6896 |
| Vice President Fixtures Sales                          | Roger D. Chamagne     | W142 N9101 Fountain Blvd.<br>Menomonee Falls, WI 53051 | 658 Ridge Wood Knoll<br>Hubertus, WI 53033               | 398-34-4036 |

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