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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800003543

1. Corporation Name

STEWART ASSOCIATES INCORPORATED OF WISCONSIN

						-	18166 11161			
Principal Place of Business Mailing Address										
5910 MINERAL POINT ROAD 5910 MINERAL POINT			D .							
MADISON WI 53705		MADISON WI 53705				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed				
		·				06/23/1998			,	
Principal Place of Business Za. Mailing Address						4. FEI Number Applied			lied For	
—	IAÇA DI DUSINOSS					39-1924321	-	+	Applicable	
Suite, Apt.	# arc	Suite, Apt. #, etc.					\$8.		dditional	
	т, в.с.	27				5. Certifcate of Status Desired		e Rec		
22 City & Stat	Δ	City & State				6. Election Campaign Financing	\$5	00 8	May Be	
23	•	28				Trust Fund Contribution			Fees	
Zip	Country	Zip	Count	rv		8. This corporation owes the current year in	tangible			
_	25	<u> </u>	30			Personal Property Tax.	Yes	. (⊠No	
24	9. Name and Address of Current	<u> </u>	,,,			10. Name and Address of New Registered	Agent			
	V. Italilo dila Addicas di Galione	- Trogiotoi	8	11	Name					
WILLIAMS, RONALD S				\perp						
3773 COMMONWEALTH BLVD			8	32	Street Addre	ess (P.O. Box Number is Not Acceptable)				
TALLAHASSEE FL 32303				13			-			
				L						
			8	14	City	FL	85	Zip C	ode	
		1500 51 11 0	- 41 1 -			- 	e L	a ite c	enistered	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	. and 607.1508, Florida Statutes if Florida. Such change was a⊔	s, the abo thorized b	ove-	nameo corpo he corporatio	oration submits this statement for the purpose of n's board of directors. I hereby accept the appo	intment a	as reg	istered	
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	da Statuti	es.						
SIGNATURE						when reinstation) DATE				
40	Signature, typed or printed name of registered agent		Registered A	gent :	signature required	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTO	S IN 12	
12.	OFFICERS AND	D DIRECTORS			7	ADDITIONS/CHANGES TO OFFICERS A	☐ Cha		Addition	
TITLE	P		1.1 11111					ango		
NAME	KOLQUIST, LEE A		1.2 NAM	_		,				
STREET ADDRESS	l .		1.3 STRI	EETA	ADDRESS .					
CITY-ST-ZIP	ELGIN IL		1.4 CITY	_	ZIP		☐ Cha		Addition	
TITLE	CD	☐ DELETE 2.1		E				inge	(_) Addition	
NAME	SHEA, KEVIN G		2.2 NAM	Ε						
STREET ADDRESS	l .		2.3 STRI	EET A	ADDRESS					
CITY-ST-ZIP			2.4 CITY	r-ST-	-ZIP					
TITLE	S	☐ DELETE	3.1 TTTL	Ē			☐ Cha	inge	☐ Addition	
NAME	BLANKENHEIM, DONNA C		3.2 NAM	E						
STREET ADDRESS	5910 MINERAL POINT ROAD		3.3 STRI	EETA	ADDRESS					
CITY-ST-ZIP	MADISON WI		3.4. CIT	/-ST-	-ZIP					
TITLE	TD	☐ DELETE	4,1 TITL	E			☐ Cha	ange	☐ Addition	
NAME	DUNAGAN, JOHN D		4. 2 NAA	Æ		~				
STREET ADDRESS	5040 AMUEDAL DONE DOAD		4.3 STRI	EETA	ADDRESS					
CITY-ST-ZIP	MADISON WI		4.4 CITY	-ST-	ZIP					
TITLE	D	☐ DELETE	5.1 TTL				Cha	ange	Addition	
NAME .	BENSON WAYNE A		5.2 NAM	ΙE						

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. CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

61 TITLE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

5910 MINERAL POINT ROAD

RETZLAFF, GEORGE B

747 DAVIS ROAD

MADISON WI

☐ DELETE

5910 Mineral Point Road

Jason E. Smith

608/238-5851

FILED

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90205 009 ***150.00

X Addition

☐ Change