

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004552

FILED
Jan 08, 2004
Secretary of State

Entity Name: TRADE PRESS PUBLISHING CORPORATION

Current Principal Place of Business:

2100 W. FLORIST AVE.
MILWAUKEE, WI 53209

New Principal Place of Business:

Current Mailing Address:

2100 W. FLORIST AVE.
MILWAUKEE, WI 53209

New Mailing Address:

FEI Number: 39-1622937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARENS, ROBERT W
6671 W. INDIANTOWN, STE 56-426
JUPITER, FL 33458

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: CP () Delete
Name: WISNIEWSKI, ROBERT J
Address: 2100 W. FLORIST AVE.
City-St-Zip: MILWAUKEE, WI 53209

Title: CVST () Delete
Name: ARENS, ROBERT W
Address: 2100 W. FLORIST AVE.
City-St-Zip: MILWAUKEE, WI 53209

Title: D () Delete
Name: NAMMACHER, TOM
Address: 2201 AVENUE A
City-St-Zip: BRADENTON BEACH, FL 324172252

Title: D () Delete
Name: HEILIGENSTEIN, R. RON
Address: 7374 N. SENCA CANYON DR.
City-St-Zip: TUCSON, AZ 85718

Title: D () Delete
Name: DELGADILLO, JOSEPH
Address: 4900 W BROWN DEER RD
City-St-Zip: MILWAUKEE, WI 53223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 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: ROBERT W. ARENS

VP

01/08/2004

Electronic Signature of Signing Officer or Director

Date