

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F98000005337**

1. Entity Name

INDUSTRIES FOR THE BLIND, INC.**FILED**
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90957 020 ****61.25

Principal Place of Business

Mailing Address

**3220 W. VLIET STREET
MILWAUKEE WI 53208-2400****3220 W. VLIET STREET
MILWAUKEE WI 53208-2453**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

39-0840476

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State
SEE ATTACHED FOR ADDITIONAL DIRECTIONS****10. OFFICERS AND DIRECTORS****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**TITLE ☐ Delete
NAME **P**
STREET ADDRESS **LANGE, CHARLES**
CITY-ST-ZIP **3220 W. VLIET STREET
MILWAUKEE WI 53208-2400**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME **S**
STREET ADDRESS **HEGLER, BETTY**
CITY-ST-ZIP **3220 W. VLIET STREET
MILWAUKEE WI 53208-2400**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME **T**
STREET ADDRESS **WALLS, KAREN**
CITY-ST-ZIP **3220 W. VLIET STREET
MILWAUKEE WI 53208-2400**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME **C**
STREET ADDRESS **TREPTOW, DEAN**
CITY-ST-ZIP **3220 W. VLIET STREET
MILWAUKEE WI 53208-2400**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME **VC**
STREET ADDRESS **HIRSCH, CLAUDE**
CITY-ST-ZIP **3220 W. VLIET STREET
MILWAUKEE WI 53208-2400**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME **D**
STREET ADDRESS **BRUECKER, JOHN**
CITY-ST-ZIP **3220 W. VLIET STREET
MILWAUKEE WI 53208-2400**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-28-00 (414) 933-435

CR2E037 (9/99)

#39-0840476
Industries for the Blind, Inc.
Additional Directors

Attachment
F98000005337
955168

David Coverdale D
3220 W Vliet St.
Milwaukee, WI 53208-2400

Nona Graves D
3220 W Vliet St.
Milwaukee, WI 53208-2400

Paul Haas D
3220 W Vliet St.
Milwaukee, WI 53208-2400

James Henderson, Jr. D
3220 W Vliet St.
Milwaukee, WI 53208-2400

James Mallatt D
3220 W Vliet St.
Milwaukee, WI 53208-2400

Howard Markwardt D
3220 W Vliet St.
Milwaukee, WI 53208-2400

Don Natzke D
3220 W Vliet St.
Milwaukee, WI 53208-2400

John Stolz D
3220 W Vliet St.
Milwaukee, WI 53208-2400

Bob Sielen D
3220 W Vliet St.
Milwaukee, WI 53208-2400