

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**

09-16-2002 90096 019 \*\*\*550.00

**DOCUMENT # F98000005823**

1. Entity Name  
**WISPAK TRANSPORT, INC.**

Principal Place of Business  
**200 SOUTH EMMER LANE**  
**MILWAUKEE WI 53233**

Mailing Address  
**200 SOUTH EMMER LANE**  
**MILWAUKEE WI 53233**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **39-1142938**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM**  
**C/O CT 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ P ☐ Delete  
 NAME **SEGE, JUSTIN**  
 STREET ADDRESS **200 SOUTH EMMER LANE**  
 CITY-ST-ZIP **MILWAUKEE WI 53233**

TITLE ☐ Change ☒ Addition  
 NAME **DIRECTOR SEGE, JUSTIN**  
 STREET ADDRESS **200 SOUTH EMMER LN**  
 CITY-ST-ZIP **MILWAUKEE, WI 53233**

TITLE ☒ V ☐ Delete  
 NAME **LANG, GEORGE**  
 STREET ADDRESS **200 SOUTH EMMER LANE**  
 CITY-ST-ZIP **MILWAUKEE WI 53233**

TITLE ☐ Change ☒ Addition  
 NAME **DIRECTOR - JONATHAN E. MEIER**  
 STREET ADDRESS **200 SOUTH EMMER LANE**  
 CITY-ST-ZIP **MILWAUKEE, WI 53233**

TITLE ☒ D ☐ Delete  
 NAME **BUCKNER, WILLIAM**  
 STREET ADDRESS **151 N. MAIN**  
 CITY-ST-ZIP **WICHITA KS 67202**

TITLE ☐ Change ☒ Addition  
 NAME **DIRECTOR WILLIAM F. RUPP**  
 STREET ADDRESS **15407 McGinty Rd**  
 CITY-ST-ZIP **WAYZATA, MN 55391**

TITLE ☒ D ☐ Delete  
 NAME **DOLINER, DAVID S**  
 STREET ADDRESS **151 N. MAIN**  
 CITY-ST-ZIP **WICHITA KS 67202**

TITLE ☐ Change ☒ Addition  
 NAME **VICE PRESIDENT HALBACH, PATRICE H.**  
 STREET ADDRESS **15407 McGinty Rd**  
 CITY-ST-ZIP **WAYZATA, MN 55391**

TITLE ☒ C ☐ Delete  
 NAME **QUAM, CRAIG W**  
 STREET ADDRESS **200 SOUTH EMMER LANE**  
 CITY-ST-ZIP **MILWAUKEE WI 53233**

TITLE ☐ Change ☒ Addition  
 NAME **SECRETARY JON D. LAMMERS**  
 STREET ADDRESS **15407 McGinty Rd**  
 CITY-ST-ZIP **Wayzat, MN 55391**

TITLE ☒ T ☐ Delete  
 NAME **VEAZEY, WILLIAM W**  
 STREET ADDRESS **15407 MCGINTY RD. WEST**  
 CITY-ST-ZIP **WAYZATA MN 55391**

TITLE ☐ Change ☒ Addition  
 NAME **TREASURER VEAZEY, WILLIAM W.**  
 STREET ADDRESS **15407 McGinty Rd**  
 CITY-ST-ZIP **Wayzata, MN 55391**

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William W. Veazey*

Assistant Secretary

09-04-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

F9800000582

**WISPAK TRANSPORT INC**

**OFFICERS -- CONTINUED**

**THE BUSINESS ADDRESS FOR ALL OFFICERS  
AND DIRECTORS IS:**

**15407 MC GINTY RD  
WAYZATA, MN 55391**

**ANNE E. CARLSON**

**ASSISTANT SECRETARY**

**JAMES R. CLEMENS**

**ASSISTANT SECRETARY**

**JANET S. HIGGINS**

**ASSISTANT SECRETARY**

**LILLIAN I. LUNDEEN**

**ASSISTANT SECRETARY**

**JEANNE Y. SMITH**

**ASSISTANT SECRETARY**