


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 12, 2004 8:00 am**  
**Secretary of State**

04-12-2004 90646 042 \*\*\*150.00

<b>DOCUMENT # F98000005823</b>		
1. Entity Name WISPAK TRANSPORT, INC.		

Principal Place of Business 200 SOUTH EMMER LANE MILWAUKEE, WI 53233	Mailing Address PO BOX 5626 MINNEAPOLIS, MN 55440-5626
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**14002209**



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01062004 Chg-P CR2E034 (10/03)

4. FEI Number 39-1142938	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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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 _____
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<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SEGEL, JUSTIN 15407 MC GINTY RD WAYZATA, MN 55391 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	* PLEASE SEE ATTACHED LIST <input type="checkbox"/> Change <input type="checkbox"/> Addition OF ADDITIONAL OFFICERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEIER, JONATHAN E 15407 MCGINTY RD WAYZATA, MN 55391 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUCKNER, WILLIAM 15407 MC GINTY RD WAYZATA, MN 55391 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOLINER, DAVID S 15407 MC GINTY RD WAYZATA, MN 55391 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SMITH, JEANNE Y 15407 MC GINTY RD WAYZATA, MN 55391 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUPP, WILLIAM F 15407 MCGINTY RD. WEST WAYZATA, MN 55391 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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: 	James R. Clemens, Assistant Secretary	04-06-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #

952-742-6419

*Attachment*

14002209  
*# F9800005923*

**WISPAK TRANSPORT, INC**

**APRIL, 2004**

**ADDITIONAL OFFICERS:**

**PATRICE H. HALBACH**

**VICE PRESIDENT**

**GEORGE LANG**

**VICE PRESIDENT**

**JON D. LAMMERS**

**SECRETARY**

**WILLIAM W. VEAZEY**

**TREASURER**

**CRAIG W. QUAM**

**CONTROLLER**

**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**

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

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