

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000002941

1. Entity Name
AHC TENANT, INC.

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90022 029 ***158.75

Principal Place of Business
10000 INNOVATION DRIVE
TAX DEPT
MILWAUKEE WI 53226

Mailing Address
10000 INNOVATION DRIVE
TAX DEPT
MILWAUKEE WI 53226



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10000 INNOVATION DR. Suite, Apt. #, etc. TAX DEPT. City & State MILWAUKEE WI Zip 53226		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		4. FEI Number 39-1963754	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required					

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (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) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP DCP LASKY, WILLIAM F 450 N. SUNNYSLOPE ROAD BROOKFIELD WI 53005 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP VPAS KRISTIN A. FERGE 10000 INNOVATION DR MILWAUKEE WI 53226 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP D P VICK, STEVEN L 450 N. SUNNYSLOPE ROAD BROOKFIELD WI 53005 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP VPAS GERI KRUPP-GORDON 10000 INNOVATION DR. MILWAUKEE WI 53226 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DVST KOMULA, THOMAS E 450 N. SUNNYSLOPE ROAD BROOKFIELD WI 53005 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP VPAS ANTHONY R. GEONOTTI JR 10000 INNOVATION DR. MILWAUKEE WI 53226 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP DVAS OHLENDORF, MARK W 450 N. SUNNYSLOPE ROAD BROOKFIELD WI 53005 <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 VPAS BOITANO, DAVID M 1142 BROADWAY PLAZA, SUITE 300 TACOMA WA 98402 <input checked="" 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 VPAS PETERSON, JOHN D 450 N. SUNNYSLOPE ROAD BROOKFIELD WI 53005 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Kristin Ferge KRISTIN FERGE VP 4-23-01 414-918-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)