## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F99000004971

Entity Name: SKIPPER BUD'S OF ILLINOIS, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
450 BASIN	FAX HARBOR N STREET N BEACH, FL			
Current N	lailing Addre	ss:	New Mailing Address:	
450 BASIN	FAX HARBOR N STREET N BEACH, FL			
FEI Number	: 39-1569150	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
TALLAHA: The above in the State	e of Florida.		purpose of changing its registere	ed office or registered agent, or both,
SIGNATU		nic Signature of Registered Ag	ent	 Date
	mpaign Financir S AND DIREC	g Trust Fund Contribution().	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:		) Delete , DENNIS E AKE ROAD	Title: Name: Address: City-St-Zip:	( ) Change( ) Addition
Title: Name: Address: City-St-Zip:	SD ( SUCHOMEL, A 5645 RACHEL RACINE, WI 5	GLEN	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	THEISEN, RON 1919 SOUTH N	) Delete NALD P MARINA DRIVE WI 532071258	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ( PRETASKY, M 6312 TARRY L NASHOTAH, W	AND	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address:	PRETASKY, N	) Delete ICHAEL J JR. NORTH SHORE DRIVE	Title: Name: Address:	( ) Change ( ) Addition

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.

City-St-Zip:

SIGNATURE: RONALD P THEISEN V 04/30/2003

City-St-Zip:

MUSKEGO, WI 53150