


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005 8:00 am
Secretary of State

02-15-2005 90018 017 ***150.00

DOCUMENT # H03175 1. Entity Name CAPE WINDS, INC.					
Principal Place of Business 710 N. PLANKINTON AVE. SUITE 1200 MILWAUKEE, WI 53203 US				Mailing Address 710 N. PLANKINTON AVE. SUITE 1200 MILWAUKEE, WI 53203 US	
2. Principal Place of Business 1000 Shorewood Drive		3. Mailing Address Suite, Apt. #, etc. Suite 200			
City & State Cape Canaveral, FL		City & State City & State			
Zip 32920		Country US		4. FEI Number 39-1485729	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. 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	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZILBER, JOSEPH J 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SEE ATTACHED LIST FOR ADDITIONAL OFFICERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WIGCHERS, ARTHUR W 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV STEIN, GERALD M 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Title should read: D/V			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHEVALIER, STEPHAN J 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRV JANZ, JAMES F 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS YOUNG, JAMES B 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203	<input type="checkbox"/> Delete <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 B. Young, Vice President 01/31/05 414-274-2421			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			

ATTACHMENT

40018584

CAPE WINDS, INC.
DOCUMENT # H03175

Additional Officers:

FV

BRAUN, ROBERT E.
710 N. PLANKINTON AVE., SUITE #1000
MILWAUKEE, WI 53203

V

BENNETT, BRENDA C.
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

V

BORRIS, JAMES D.
710 N. PLANKINTON AVENUE, #1100
MILWAUKEE, WI 53203

V

GRANDLICH, JOHN R.
710 N. PLANKINTON AVE., SUITE #1100
MILWAUKEE, WI 53203

AS

DeLISLE, SANDRA J.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

AS

MADIGAN, MARK S.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203