


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007 8:00 am
Secretary of State

04-10-2007 90015 025 ***150.00

DOCUMENT # H03175		
1. Entity Name CAPE WINDS, INC.		

Principal Place of Business 1000 SHOREWOOD DRIVE SUITE 200 CAPE CANAVERAL, FL 32920 US	Mailing Address 710 N. PLANKINTON AVE. SUITE 1200 MILWAUKEE, WI 53203 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03022007 Chg-P CR2E034 (12/06)

4. FEI Number 39-1485729	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 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	D ZILBER, JOSEPH J 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input 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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHEVALIER, STEPHAN J 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <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	SRV JANZ, JAMES F 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <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	VS YOUNG, JAMES B 710 N. PLANKINTON AVE., SUITE 1200 MILWAUKEE, WI 53203 <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 exemptions contained in Chapter 119, 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 03/12/2007**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT 40055476

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