

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 17, 2005 8:00 am**  
**Secretary of State**

02-17-2005 90017 027 \*\*\*150.00

**DOCUMENT # J33910**

**1. Entity Name**  
**TOWNE REALTY OF WEST FLORIDA, INC.**



**Principal Place of Business**  
710 N PLANKINTON AVENUE  
SUITE #1200  
MILWAUKEE, WI 53203 US

**Mailing Address**  
710 N PLANKINTON AVENUE  
SUITE #1200  
MILWAUKEE, WI 53203 US

40019424



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02082005

Chg-P

CR2E034 (10/03)

City & State

City & State

**4. FEI Number**

39-1576894

Applied For

Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired** ☐

**\$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**

Signature, typed or printed name of registered agent and title if applicable.

(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.** ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** D ☐ Delete  
**NAME** ZILBER, JOSEPH J  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** V ☐ Change ☒ Addition  
**NAME** GRANDLICH, JOHN R.  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1100  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** P ☐ Delete  
**NAME** WIGCHERS, ARTHUR W JR  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** V ☐ Change ☒ Addition  
**NAME** JANZ, JAMES F.  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** V ☐ Delete  
**NAME** BORRIS, JAMES D  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1100  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** V ☐ Change ☒ Addition  
**NAME** KEARNEY, KITT E R.  
**STREET ADDRESS** 8430 ENTERPRISE CIRCLE, SUITE 130  
**CITY-ST-ZIP** BRADENTON, FL 34202

**TITLE** V/AS ☐ Delete  
**NAME** YOUNG, JAMES B  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** V ☐ Change ☒ Addition  
**NAME** STEIN, GERALD M.  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** FV ☐ Delete  
**NAME** BRAUN, ROBERT E  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1000  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** T ☐ Change ☒ Addition  
**NAME** CHEVALIER, STEPHAN, J.  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** V/AS ☐ Delete  
**NAME** MADIGAN, MARK S  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**TITLE** AS ☐ Change ☒ Addition  
**NAME** DELISLE, SANDRA  
**STREET ADDRESS** 710 N. PLANKINTON AVENUE, #1200  
**CITY-ST-ZIP** MILWAUKEE, WI 53203

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/8/2005 (414) 274-2421