

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED

07 JAN 30 PM 3:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M02000001070

1. Entity Name
BUELL DISTRIBUTION COMPANY, LLC



Principal Place of Business
3700 WEST JUNEAU AVENUE
MILWAUKEE, WI 53208

Mailing Address
3700 WEST JUNEAU AVENUE
MILWAUKEE, WI 53208

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country



01152007 Chg-LLC CR2E083 (12/06)

4. FEI Number
04-3620640

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 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

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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ZIEMER, JAMES L 3700 WEST JUNEAU AVENUE MILWAUKEE, WI 53208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300086838613 02/01/07--01005--001 **\$600.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FLICKINGER, JON R 3700 WEST JUNEAU AVENUE MILWAUKEE, WI 53208 <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	MGRM LIONE, GAIL A 3700 WEST JUNEAU AVENUE MILWAUKEE, WI 53208 <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	MGRM CALAWAY, TONIT M 3700 WEST JUNEAU AVENUE MILWAUKEE, WI 53208 <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	MGRM BROSTOWITZ, JAMES M 3700 WEST JUNEAU AVENUE MILWAUKEE, WI <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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Tonit M. Calaway 1-1807 (414) 343-8592

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Tonit M. Calaway, Asst. Secretary

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BUELL DISTRIBUTION COMPANY, LLC
3700 West Juneau Avenue
Milwaukee, Wisconsin 53208

James L. Ziemer, Chief Executive Officer

Erik F. Buell, Chairman and Chief Technical Officer

Jon. R. Flickinger, President and Chief Operating Officer

James M. Brostowitz, Vice President, Treasurer and Assistant Secretary

Thomas E. Bergmann, Vice President, Chief Financial Officer and Assistant Treasurer

Gail A. Lione, Vice President and Secretary

Edward M. Krishok, Assistant Secretary

Tonit M. Calaway, Assistant Secretary

Cynthia A. Rooks, Assistant Treasurer

Directors

James L. Ziemer

Jon R. Flickinger