

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000004197

Entity Name: GMR MARKETING, LLC

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

5000 S. TOWNE DR
NEW BERLIN, WI 53151

New Principal Place of Business:

Current Mailing Address:

5000 S. TOWNE DR
NEW BERLIN, WI 53151

New Mailing Address:

FEI Number: 22-3754606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: CFO () Delete
Name: REYNOLDS, GARY M
Address: W305 1663 SILVERWOOD LANE
City-St-Zip: DELAFIELD, WI 53018

Title: MGR () Delete
Name: HARRISON, TOM
Address: 437 MADISON AVE
City-St-Zip: NEW YORK, NY 10022

Title: MGR () Delete
Name: GERAGHTY, VIRGINIA
Address: W145 N 7579 NORTH WOOD DRIVE
City-St-Zip: MENOMONEE FALLS, WI 53018

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: REYNOLDS, GARY M
Address: W305 1663 SILVERWOOD LANE
City-St-Zip: DELAFIELD, WI 53018

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic 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: VIRGINIA GERAGHTY

MGR

04/27/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date