


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR -5 AM 11:28

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company **DOCUMENT # M96000000378**

SAFE HARBOR GROUP LLC
P.O. BOX 179
NASHOTAH WI 53058

99-AR
CM

1a. Principal Place of Business Address

33092 WATERTOWN PLANK ROAD
NASHOTAH WI 53058

2 Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10/01/1996

WI

City & State

City & State

4. FEI Number

39-1836446

☐ Applied For

☐ Not Applicable

Zip

Country

Zip

Country

5. Date of Last Report

03/24/1998

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

Zip Code

FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations

SIGNATURE

DATE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent Signature Required When Registered Agent)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGR

PAKALSKI, DAVID A

33092 WATERTOWN PLANK ROAD NASHOTAH WI

1000002841181
-04/16/99--01002--021
****188.75 ****188.75

11. I do 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 annual 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; and that my name appears in Block 10, or on attachment with an address.

SIGNATURE:

David Pakschi

3/31/99 4/14/97

SIGNATURE AND TYPED NAME OF SIGNED MANAGER OR MEMBER MANAGER

Date

Signature