


File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 28 MAR 25 PM 1:43 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company		DOCUMENT # M97000000733		1a. Principal Place of Business Address	
WISCONSIN INVESTMENTS LLC 13400 BISHOP'S LANE, SUITE 100 BROOKFIELD WI 53005		98-AP CM		13400 BISHOP'S LANE, SUITE 1 BROOKFIELD WI 53005	
2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		11/06/1997	
City & State		City & State		4. FEI Number	
Zip		Country		39-1845871	
				5. Date of Last Report	
				N/A	
7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Office			
BENNETT, SUSAN FLEMING % STEARNS, WEAVER, ET AL 401 JACKSON ST. #2200 SUNTRUST FIN. TAMPA FL 33302		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code			
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 _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>					
10. Title	Managing Members/Managers	Business Street Address		City, State and Zip Code	
MGRM	TESKE, ANDREW C	13400 BISHOP'S LANE, SUITE		BROOKFIELD WI	
MGRM	WALLEN, TIMOTHY J	13400 BISHOP'S LANE, SUITE		BROOKFIELD WI	
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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 an attachment with an address.					
SIGNATURE: <u>Andrew C. Teske</u> 3/20/98 (414) 797-9400 <small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #</small>					