

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90103 019 ***150.00

DOCUMENT # P 01000047737

1. Entity Name

KOHLER CAPITAL IV, CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

P.O. Box 216

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 216

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Kohler WI

Zip

53044

Country

USA

City & State

Kohler WI

Zip

53044

Country

USA

4. FEI Number

☒ Applied For

☐ Not Applicable

Applied For

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Charles Holland

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

231 Lexington Dr.

City

Daytona Beach

FL

Zip Code

32114

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Christopher Werner 2620 N. 40th Street Sheboygan, WI 53083
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHRISTOPHER WERNER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-6-02

Date

920-207-0100

Daytime Phone #

CR2E034B (12/01)

Attachment

677881
PO1000047737

Kohler Capital IV, Corporation

P.O. Box 216
Kohler, WI 53044
Tel: 920-207-0100

September 6, 2002

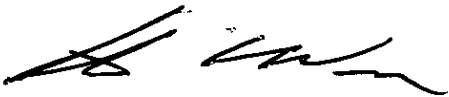
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2002 UBR

Attention:

In April of 2002 I submitted a completed UBR form for this company. It appears that you never received it, but did receive one for Kohler Capital I, Corporation. A gentlemen by the name of Tyrone in your office advised me to send this letter requesting the late fee to be waived. Enclosed herein is a completed UBR form and a check for \$150.

Sincerely,



Christopher Werner
President