

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

10/2

DOCUMENT # **P01000047749**



1. Entity Name
KOHLER CAPITAL III, CORPORATION

03 JUN 25 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

Principal Place of Business
**PO BOX 216
KOHLER WI 53044**

Mailing Address
**PO BOX 216
KOHLER WI 53044**



06/09/03 901171028 \$150.00
↑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
54-2048542

Applied For
 Not Applicable

Zip Country

Zip Country

6. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOLLAND, CHARLES
231 LEXINGTON DRIVE
DAYTONA BEACH FL 32114**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME Delete
P. WERNER, CHRISTOPHER
STREET ADDRESS **2620 N 40TH STREET**
CITY-ST-ZIP **SHEBOYGAN WI 53083**

TITLE NAME Change Addition
P GERARD WERNER
STREET ADDRESS **P.O. Box 216**
CITY-ST-ZIP **KOHLER WI 53044**

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
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TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**

GERARD WERNER 4-22-03 920-207-0100
Date Daytime Phone #

CR2E034 (10/02)

20822

▼
KOHLER

C A P I T A L M A N A G E M E N T

June 20, 2003

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Request to waive late fee

To whom it may concern:

On June 20th of 2003 I spoke to Michelle Milligan in your State offices who informed me that I should send this letter to Request to Waive the late fee for Kohler Capitals UBR. Our office had sent the UBR in April.

Thank you for your attention to this matter.

Respectfully yours,



Christopher Werner

CW/lrs