
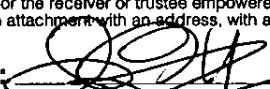


FILED
Feb 15, 2005 8:00 am
Secretary of State

40018578

DOCUMENT # P01000070446				02-15-2005 90018 023 ***150.00	
1. Entity Name TOWNE DEVELOPMENT OF ISLAND POINTE, INC.					
Principal Place of Business 710 NORTH PLANKINTON AVE., STE. 1200 MILWAUKEE, WI 53203		Mailing Address 710 NORTH PLANKINTON AVE., STE. 1200 MILWAUKEE, WI 53203			
2. Principal Place of Business 1000 Shorewood Drive Suite, Apt. #, etc. Suite 200		3. Mailing Address Suite, Apt. #, etc.		4. FEI Number 39-2032528	
City & State Cape Canaveral, FL		City & State		Applied For Not Applicable	
Zip 32920 Country US		Zip Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324		7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D <input type="checkbox"/> Delete NAME ZILBER, JOSEPH J STREET ADDRESS 710 NORTH PLANKINTON AVE., STE. 1200 CITY-ST-ZIP MILWAUKEE, WI 53203			TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME SEE ATTACHED LIST FOR ADDITIONAL OFFICERS STREET ADDRESS CITY-ST-ZIP		
TITLE P <input type="checkbox"/> Delete NAME WIGCHERS, ARTHUR W JR. STREET ADDRESS 710 NORTH PLANKINTON AVE., #1200 CITY-ST-ZIP MILWAUKEE, WI 53203			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE V <input type="checkbox"/> Delete NAME BENNETT, JACK A STREET ADDRESS 1000 SHOREWOOD DRIVE, #200 CITY-ST-ZIP CAPE CANAVERAL, FL 32920			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE V <input type="checkbox"/> Delete NAME BORRIS, JAMES D STREET ADDRESS 710 NORTH PLANKINTON AVE., #1100 CITY-ST-ZIP MILWAUKEE, WI 53203			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE VS <input type="checkbox"/> Delete NAME YOUNG, JAMES B STREET ADDRESS 710 NORTH PLANKINTON AVE., #1200 CITY-ST-ZIP MILWAUKEE, WI 53203			TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME Title should read V/S STREET ADDRESS CITY-ST-ZIP		
TITLE AS <input type="checkbox"/> Delete NAME DELISLE, SANDRA J STREET ADDRESS 710 NORTH PLANKINTON AVE., #1200 CITY-ST-ZIP MILWAUKEE, WI 53203			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME 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:  James B. Young, Vice President 01/31/05 414-274-2421					

ATTACHMENT

40018578

TOWNE DEVELOPMENT OF ISLAND POINTE, INC.

DOCUMENT #P01000070446

Additional Directors/Officers:

V/AS

BENNETT, BRENDA C.
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

AS

MADIGAN, MARK S.
710 N. PLANKINTON AVE., SUITE 1200
MILWAUKEE, WI 53203

V

BENNETT, KOHN
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

V

BENNETT, MAATH A.
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

FV

BRAUN, ROBERT E.
710 N. PLANKINTON AVE., SUITE #1000
MILWAUKEE, WI 53203

V/T

CHEVALIER, STEPHAN J.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203

V

GRANDLICH, JOHN R.
710 N. PLANKINTON AVE., SUITE #1100
MILWAUKEE, WI 53203

SRV

JANZ, JAMES F.
710 N. PLANKINTON AVE., SUITE 1200
MILWAUKEE, WI 53203

V

HAYES, JESSICA
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920

EV

STEIN, GERALD M.
710 N. PLANKINTON AVE., SUITE #1200
MILWAUKEE, WI 53203V/AS

V

WASDIN, MILLIE
1000 SHOREWOOD DRIVE, #200
CAPE CANAVERAL, FL 32920