

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037640

Entity Name: HINSKE ENTERPRISES, INC.

FILED
Feb 24, 2006
Secretary of State

Current Principal Place of Business:

4517 S GAINS RD
TAMPA, FL 33611

New Principal Place of Business:

4517 S GAINES RD
TAMPA, FL 33611

Current Mailing Address:

MARK HINSKE, 631 8TH STREET
MENASHA, WI 54952

New Mailing Address:

FEI Number: 56-2334361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINSKE, ERIC S
4517 S GAINS RD
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

HINSKE, ERIC S
4517 S GAINES RD
TAMPA, FL 33611 US

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:

02/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HINSKE, ERIC S
Address: 4517 S GAINS RD
City-St-Zip: TAMPA, FL 33611

Title: PRES () Delete
Name: HINSKE, ERIC S
Address: 4517 S GAINS RD
City-St-Zip: TAMPA, FL 33611

Title: VP () Delete
Name: HINSKE, MARK R
Address: 631 8TH STREET
City-St-Zip: MENASHA, WI 54952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HINSKE, ERIC S
Address: 4517 S GAINES RD
City-St-Zip: TAMPA, FL 33611

Title: PRES (X) Change () Addition
Name: HINSKE, ERIC S
Address: 4517 S GAINES RD
City-St-Zip: TAMPA, FL 33611

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK HINSKE

VP

02/24/2006

Electronic Signature of Signing Officer or Director

Date