2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 11, 2002 8:00 am DOCUMENT # P06772 **Secretary of State** 1. Entity Name 02-11-2002 90001 046 ***150.00 B & G REALTY, INC. Principal Place of Business Mailing Address 250 E WISCONSIN AVE 250 E. WISCONSIN AVE. BUULUAUU ATTN: LEGAL DEPT. STE. 1700 MILWAUKEE WI 53202 MILWAUKEE WI 53202-4221 US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 39-1047119 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (9/01) ☐ Change ☐ Addition ☐ Delete TITLE TITLE DAT NAME MARCUS, STEPHEN NAME CR2E034 STREET ADDRESS STREET ADDRESS 7580 N RIVER RD CITY-ST-ZIP CITY-ST-ZIP RIVER HILLS WI ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME KISSINGER, THOMAS F STREET ADDRESS STREET ADDRESS 3260 YALE COURT CITY-ST-7IP CITY-ST-ZIP **BROOKFIELD WI** Change Addition TITLE Delete TITLE **VPD** NAME NAME Bruce Olson is no longer a director, only OLSON, BRUCE J. STREET ADDRESS STREET ADDRESS the Vice President 10540 N. COUNTRY CLUB DRIVE CITY-ST-ZIP CITY-ST-ZIP **MEQUON WI** ☐ Change Addition **₹** Delete TITLE **AVP** NAME NAME LUCAS, DAVID T. STREET ADDRESS STREET ADDRESS 3142 E. KENWOOD BLVD. CITY-ST-ZIP CITY-ST-ZIP MILWAUKEE WI [K] Change Addition ☐ Delete TITLE Greg Marcus is also a director NAME NAME MARCUS, GREG STREET ADDRESS STREET ADDRESS 250 EAST WISCONSIN AVENUE CITY - ST - ZIP CITY-ST-ZIP MILWAUKEE WI ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME **NEIS. DOUGLAS A.** STREET ADDRESS STREET ADDRESS 250 E WISCONSIN AVE CITY-ST-7IP CITY-ST-7IF **MILWAUKEE WI 53202** 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 of trustee empowered to accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all properties the provided of the corporation of the corporation of the receiver of trustee empowered to accurate and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all properties and the corporation of the corpora

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Daytime Phone #