


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2004 8:00 am**  
**Secretary of State**

04-23-2004 90260 005 \*\*\*150.00

<b>DOCUMENT # P21065</b> 1. Entity Name <b>MGIC MORTGAGE MARKETING CORPORATION</b>					
Principal Place of Business <b>270 E KILBOURN AVENUE MILWAUKEE, WI 53202 US</b>			Mailing Address <b>P.O. BOX 488 LEGAL DEPARTMENT MILWAUKEE, WI 53201 US</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		City		Country	
6. Name and Address of Current Registered Agent  <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>EVPD LAUER, JON MICHAEL 270 E KILBOURN AVENUE MILWAUKEE, WI</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>AS ZIINO, JOSEPH J., JR. 270 E KILBOURN AVENUE MILWAUKEE, WI</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PDCE CULVER, CURT S 270 E KILBOURN AVENUE MILWAUKEE, WI 53202</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S LANE, JEFFREY H 270 E. KILBOURN AVE. MILWAUKEE, WI</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VPT KARPOWICZ, JAMES A 270 E KILBOURN AVENUE MILWAUKEE, WI 53202</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SV/O</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SV/CAO KOMANECKI, JOSEPH J. 270 E. KILBOURN AVENUE MILWAUKEE, WI 53202</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
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.					
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <b>JOSEPH J. ZIINO, JR.</b>			Date <b>4/15/2004</b> Daytime Phone #		

24053246



04152004 Chg-P CR2E034 (10/03)

4. FEI Number **39-1495967** Applied For  
Not Applicable

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

*Attachment*

*24053246*

*# P21065*

**2004 for Profit Corporation Annual Report**

**MGIC MORTGAGE MARKETING CORPORATION / Document #P21065**

**10. Officers**

Snodgrass, Steven T.

SV

Stilwell, Dan D.

V

Heyrman, Heidi A.

Asst. S

Pendergast, Lisa M.

AT

The address of all of the above-listed officers is:

270 E. Kilbourn Avenue  
Milwaukee, WI 53202