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Mar 11 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P33995**

(2)

1. Corporation Name  
**GREENBERG SHOWS, INC.**



Principal Place of Business <b>21027 CROSSROADS CIRCLE P O BOX 1612 WAUKESHA WI 53187-1612 US</b>	Mailing Address <b>21027 CROSSROADS CIRCLE P O BOX 1612 WAUKESHA WI 53187-1612 US</b>
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2. Principal Place of Business 21 Suite, Apt #, etc. 22 City & State <b>Waukesha WI</b> 24 Zip <b>53187-1612</b> 25 Country	2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State <b>Waukesha WI</b> 29 Zip <b>53187-1612</b> 30 Country
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3. Date Incorporated or Qualified <b>05/21/1991</b>	3a. Date of Last Report <b>03/18/1996</b>
4. FEI Number <b>36-3741255</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324</b>	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GREENBERG, LINDA F. 21027 CROSSROADS CIRCLE WAUKESHA, WS <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Waukesha WI 53187-1612</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KALMBACH, CHARLES A. 21027 CROSSROADS CIR WAUKESHA WI <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Waukesha WI 53187-1612</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAHNKE, KSTHRYN K 21027 CROSSROADS CIRCLE WAUKESHA WI <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Mahnke, Kathryn K Waukesha WI 53187-1612</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HAYDEN, ROBERT L. JR. 21027 CROSSROADS CIRCLE WAUKESHA, WS <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Waukesha WI 53187-1612</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAS, D BOETTCHER, GERALD B. 21027 CROSSROADS CIRCLE WAUKESHA, WS <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>TAS, D Waukesha WI 53187-1612</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HIRSCHMANN, GEORGE F. 21027 CROSSROADS CIRCLE WAUKESHA, WS <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Waukesha WI 53187-1612</b>

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GERALD B. BOETTCHER 3-4-97 414-796-8776  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

X Change

**ATTACHMENT TO  
FLORIDA CORPORATION ANNUAL REPORT**

**BLOCK 12, CONTINUED: ADDITIONAL DIRECTORS**

D  
WALTER J MUNDSCHAU  
21027 CROSSROADS CIRCLE  
WAUKESHA WI 53187-1612

D  
JAMES J KING  
21027 CROSSROADS CIRCLE  
WAUKESHA WI 53187-1612

D  
LINDA H HANSON  
21027 CROSSROADS CIRCLE  
WAUKESHA WI 53187-1612