

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90191 022 \*\*\*150.00

DOCUMENT # P33995

1. Corporation Name  
GREENBERG SHOWS, INC.

Principal Place of Business  
21027 CROSSROADS CIRCLE  
P O BOX 1612  
WAUKESHA WI 53187-1612  
US

Mailing Address  
21027 CROSSROADS CIRCLE  
P O BOX 1612  
WAUKESHA WI 53187-1612  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/21/1991

4. FEI Number

36-3741255

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Waukesha WI

28 Waukesha WI

Zip Country

Zip Country

24 53187-1612 25

29 53187-1612 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME GREENBERG, LINDA F.  
STREET ADDRESS 21027 CROSSROADS CIRCLE  
CITY-ST-ZIP WAUKESHA WI 53187 ☒ DELETE

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D  
NAME KALMBACH, CHARLES A.  
STREET ADDRESS 21027 CROSSROADS CIR  
CITY-ST-ZIP WAUKESHA WI 53187 ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE D  
NAME MAHNKE, KATHRYN K  
STREET ADDRESS 21027 CROSSROADS CIRCLE  
CITY-ST-ZIP WAUKESHA WI 53187 ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE S  
NAME HAYDEN, ROBERT L. JR.  
STREET ADDRESS 21027 CROSSROADS CIRCLE  
CITY-ST-ZIP WAUKESHA WI 53187 ☒ DELETE

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE TAS  
NAME BOETTCHER, GERALD B.  
STREET ADDRESS 21027 CROSSROADS CIRCLE  
CITY-ST-ZIP WAUKESHA WI 53187 ☐ DELETE

5.1 TITLE O & D ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D  
NAME HIRSCHMANN, GEORGE F.  
STREET ADDRESS 21027 CROSSROADS CIRCLE  
CITY-ST-ZIP WAUKESHA WI 53187 ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

Gerald B. Boettcher

Gerald B. Boettcher

4-19-99

414-796-8776

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)



535354 - 90191-22  
P33945

414-796-8776  
Fax: 414-798-6550

21027 Crossroads Circle  
P.O. Box 1612  
Waukesha, WI 53187-1612

GREENBERG SHOWS, INC.

1999

12.	CONTINUED	
	OFFICERS AND DIRECTORS	ADDITIONS / CHANGES
Title Name Street City	D HANSON, LINDA H. 21027 CROSSROADS CIRCLE WAUKESHA WI 53187-1612	ADDITION
Title Name Street City	D MUNDSCHAU, WALTER J. 21027 CROSSROADS CIRCLE WAUKESHA WI 53187-1612	
Title Name Street City	D KING, JAMES J. 21027 CROSSROADS CIRCLE WAUKESHA WI 53187-1612	
Title Name Street City	O SLOCUM, JAMES J. 21027 CROSSROADS CIRCLE WAUKESHA WI 53187-1612	ADDITION